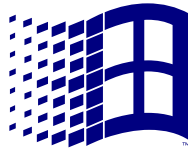


CTRAC Online User's Guide



Instructions

Provided By

Office of Information Systems

Customer Service

December, 2000

Updated May, 2004

Customer Support 1-888-601-4779

CTRAC Online User's Guide

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HOW TO USE THIS CTRAC ONLINE USER'S GUIDE

This CTRAC Online User's Guide replaces volume I & II of the previous CTRAC User's Guide. Not replaced are Section III (tables), Volume III (Batch) and Volume IV (Services and Funding). Refer to the batch section of the previous CTRAC User's Guide if your facility batches transactions to CTRAC, or you need to see the system code tables.

Beginning users should carefully review the *System Overview*, *System Security* and the *Getting Connected* sections. In addition to the guide, the help of another user at your facility can be very useful in getting you started. Use the *Detailed Procedures* section for step by step instructions on how to accomplish specific tasks. These "How To" procedures refer to pictures of the actual screens in Appendix A.

DO call the Solutions Center if you need help or have questions 888 601-4779. Keep this guide available for future reference.

Experienced users should also review the *System Overview*, *System Security* and the *Getting Connected* sections for pointers or changes they may have previously missed. For problems or unusual tasks refer to the *Detailed Procedures* section with step by step instructions. The "How To" procedures refer to pictures of the actual screens in Appendix A. Keep this guide available for future reference.

We hope all users will find this to be a useful reference guide.

REPORTING PROBLEMS

All computer connection and operations problems should be addressed to the OIS Solutions Center. The people there will either help solve the problem, or forward it to the person who can.

Toll free phone : 888 601-4779

Local phone : 573 526-5888

FAX : 573 526-5891

E-MAIL : csc@dmh.mo.gov

Mail : DMH Customer Support
Department of Mental Health
P.O. Box 687
1706 E. Elm St.
Jefferson City, MO 65102

The above phone numbers and addresses are also available from within online CTRAC. From most CTRAC screens, press the "F1" function key to open the Help screen, then "F11" to open the "Who-To-Call" screen. Pressing the "F3" function key will return you to the starting screen.

OVERVIEW

CLIENT TRACKING, REGISTRATION, ADMISSION AND COMMITMENT (CTRAC) scope:

1. To incorporate the use of an unduplicated Client identifier for all DMH Clients.
2. To provide a single set of comprehensive Client demographic and diagnostic classification information on all DMH Clients.
3. To track the admissions and program episodes of all DMH Clients through the DMH service delivery system (Divisions, Providers and various types of programs).
4. To collect User initiated enhancements to be incorporated into CTRAC after its implementation in May 1994.

MISSION STATEMENT

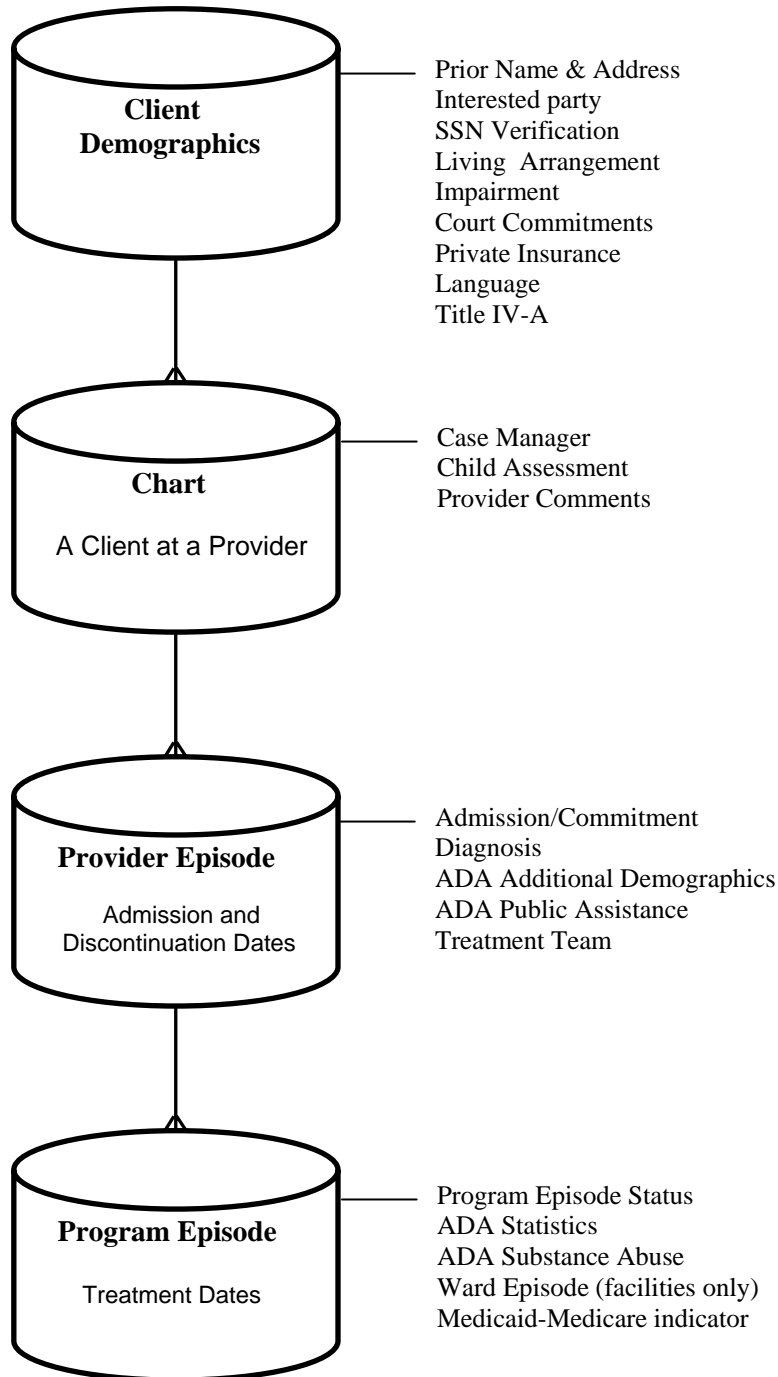
The mission of CTRAC is to provide on-line and accessible report file information on all Department of Mental Health Clients including demographics, diagnosis, and tracking of Client program episodes within a Provider, between Providers and between programs.

INFORMATION SYSTEMS POLICY STATEMENT

All Department of Mental Health service providers are required to submit computer data, through compatible communications networks to the Department of Mental Health automated information systems. The data must be keyed and maintained accurately and timely according to predefined and documented specifications.

See next page for major components of CTRAC.

CTRAC COMPONENTS



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Information Systems Access Request

POLICIES & PROCEDURES

Originally the Department of Mental Health had made it a policy to completely open the information systems. This access allowed for cross Provider 'Inquiry Only' capabilities to all Provider staff who have an authorized Userid. This Level of Access enabled the Providers to see where a Client may have been in treatment and if it was within the Division of Alcohol and Drug Abuse (ADA), the Division of Comprehensive Psychiatric Services (CPS), or the Division of Mental Retardation and Developmental Disabilities (MRDD). It did not give a Provider the ability to add, modify, or delete the information of a Client at another Provider.

The Department does allow for limited Cross Provider 'Inquiry Only' access. However, the Provider must request Cross Provider from the Division with which it contracts and then the final approval is made by the Director of Office of Information Systems.

The Provider is to notify, in writing, the Department of Mental Health-Central Office Information Systems Security Coordinator of the assignment or reassignment of the Provider Security Coordinator

All individuals with access to the Department of Mental Health Information Systems must adhere to the Code of Federal Regulations (42 CFR 431.300) and State Law (208.120 RSMo) outlining under what conditions information regarding Medicaid recipients may be released. 208.120 RSMo states, "It is unlawful for any person, association, firm, corporation, or other agency to solicit, disclose, receive, make use of or authorize, knowingly permit, participate in or acquiesce in the use of any names or lists of names for commercial or political purposes of any nature; or for any name or list of names of recipients...to be published in any manner. Anyone willfully or knowingly violating any provision of this section shall be guilty of a misdemeanor."

PROVIDER DIRECTOR:

- Select an individual to perform Provider Information Systems Security Coordinator duties as outlined below.
- Submit in writing to the Department of Mental Health-Central Office (DMH-CO) Information Systems Security Coordinator, the name and telephone number of the Provider Information Systems Security Coordinator.
- Notify in writing, the DMH-CO Information Systems Security Coordinator when a reassignment is made.

PROVIDER INFORMATION SYSTEMS SECURITY COORDINATOR:

- Orient Provider staff member to the importance of confidentiality.
- Determine access level necessary for performance of each staff's responsibility.
- Provide assistance in completing the *Access Request Form*.
- Obtain completed and signed *Access Request Form*. See appendix B.
- Sign form and mail to DMH-CO Information Systems Security Coordinator.
- Retain copy of signed access form until DMH-CO approved form is received.
- Notify Provider staff member of the Userid assigned by DMH-CO Information Systems Security Coordinator.
- Ensure Provider staff having access is kept current, i.e., name change, employment status, job duties, etc.

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POLICIES & PROCEDURES (cont.)

DEPARTMENT OF MENTAL HEALTH-CENTRAL OFFICE INFORMATION SYSTEMS SECURITY

COORDINATOR:

- Maintain Provider Information Systems Security Coordinator list.
- Maintain Division Information Systems Security Coordinator list.
- Maintain Userid and Level of Access database.
- Notify Provider Information Systems Security Coordinator of assigned Userid by returning copy of Access Request Form. See Appendix B.
- Retain original copy of approved Access Request Form.

DEPARTMENT OF MENTAL HEALTH DIVISION DIRECTORS:

- Assign one Division staff member to perform the duties of the Division Information Systems Security Coordinator.
- Assign at least one (1) Division staff member to back up the Division Information Systems Security Coordinator.
- Submit in writing to the DMH-CO Information Systems Security Coordinator the name and telephone number of the Division Information's Systems Security Coordinator and back up(s).
- Notify in writing, the DMH-CO Information Systems Security Coordinator when a reassignment is made.

DIVISION AUTHORIZING STAFF AND BACK UP:

- Be knowledgeable of the Provider staff access level needs.
- Ascertain if the Level of Access requested is appropriate for Provider or DMH-CO staff. May have to contact Provider Information Systems Security Coordinator.
- Initial & date Access Request Form.
- Return, in a timely manner, to the DMH-CO Information Systems Security Coordinator.

USER:

- Request only the Level of Access needed to carry out the responsibilities of your assigned duties.
- Read the Confidentiality Statement.
- Sign and Date the Access Request Form. See Appendix B.
- Inform, in a timely manner, the Provider Information Systems Security Coordinator as to any changes in Level of Access or employment status.
- Update Password in a timely manner.

PASSWORDS

The first time a new or reconnected User signs onto the system, the password is the Users first and last initials and the last four digits of their Social Security Number. The password expires instantly upon the first sign on. The User will have to established their own password prior to continuing into the State Data Center. Follow the prompts for changing the password.

RULES FOR PASSWORDS

1. New passwords must contain between six (6) and eight (8) characters. At least one character must be numeric. Numeric characters are **0** to **9**. At least the first character must be alphabetic. Alpha characters are **A** to **Z** and **#**, **\$**, and **@**.
2. Passwords will expire after 31 days. If a person wishes this interval to be less then 31 days, that is possible with the "Alter User" command. There will be no way to set the limit higher than 31 days.
3. Automatic Userid revocation will occur after three (3) consecutive invalid logon attempts.
4. The Resource Access Control Facility (RCAF) will not allow previously expired passwords to be used again.

WARNING: Due to the availability of data on CTRAC, it is of extreme importance that the User be aware of the confidentiality issues. User, do not reveal your password to anyone. If there is a breach in security and it is attached to your password, regardless of who may have used it, you are the one legally responsible.

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SUPERSESSION LOG-ON PROCEDURES

STATE DATA CENTER APPLICATION MENU

| | |
|---|--|
| State Data Center Application Menu | |
| <div style="text-align: center;"><div style="border: 1px solid black; padding: 5px; display: inline-block;">SDC Netname: SD08M3BW</div></div> | |
| S. SuperSession (MEIS, CTRAC, TSO) | DMH Help Desk: 573-526-5888 Toll Free: 888-601-4779 |
| Enter Application Request ____ | |

REQUIRED ACTION: Key the letter 's', press <ENTER>

NOTE: This system is not case sensitive. When <ENTER> is pressed, all letters become upper case.

ENTRY VALIDATION

| | | | |
|---|-------|------------------------------|--|
| KLGLGON1 | | Entry Validation | |
| Date : MM/DD/YY | | System : OS15 | |
| Time : HH:MM:SS | | Device : SD08M3BW | |
| | | | |
| Identification: | | | |
| Userid..... | _____ | | |
| Password..... | _____ | Change Password ? N (Y or N) | |
| | | | |
| ***** | | | |
| ** MMM MMM issouri State Data Center ** | | | |
| ** M M M M ===== ** | | | |
| ** M MM M ** | | | |
| ** MMM MMM CL/SuperSession v147 ML9401 ** | | | |
| ***** | | | |
| ENTER USERID | | | |
| Enter F1=Help F3=Exit | | | |

REQUIRED ACTION: Key Userid (User Id) - Tab down - Key Password

OPTIONAL STEP: If it is time to change your Password, Tab to 'Change Password' and update the 'N' to 'Y', press <ENTER>. Follow the prompt on the screen for changing your password, press <ENTER>

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SUPERSESSION LOG-ON PROCEDURES (cont.)

MISSOURI STATE DATA CENTER

| | | | | | |
|-----|-----------------|-----------------|------------------|------------------|--------------|
| ___ | <u>A</u> ctions | <u>O</u> ptions | <u>C</u> ommands | <u>F</u> eatures | <u>H</u> elp |
|-----|-----------------|-----------------|------------------|------------------|--------------|

KLSVSEL1 Missouri State Data Center Date : MM/DD/YY
Time : HH:MM:SS
Select sessions with a "/" or an action code. More :

| | | | |
|-----|------------|-----------------------------|--------|
| | Session ID | Description | Status |
| | ----- | ----- | ----- |
| ___ | CTRAC | CTRAC/MEIS Production | |
| ___ | TESTE | TESTE | |
| ___ | TSO | Batch CTRAC/POS (PC Upload) | |

Command ==> OS15/SD08M3BW
Enter F1=Help F3=Exit F5=Refresh F9=Retrieve F10=Action

REQUIRED ACTION: Tab to desired Session - With cursor in front of desired Session, press <ENTER>

CONFIDENTIALITY STATEMENT

Department of Mental Health Client Information is CONFIDENTIAL pursuant to State and Federal law. Violation of client rights to confidentiality by improper use or release of information can result in termination from employment or liability for damages.

As a computer system user, you are Responsible for handling confidential information in accordance with Department of Mental Health policy and the confidentiality policies of your employer.

(Press Enter To Continue)

REQUIRED ACTION: After reading statement, press <ENTER> to continue sign-on process.

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SUPERSESSION LOG-ON PROCEDURES (cont.)

Y065

DMH - Main Menu

MM-DD-YYYY

HH:MM:SS

Input the number of your choice and press ENTER.

-
1. CTRAC Main Menu
 2. Provider Main Menu
 3. MEIS Main Menu
 4. MEIS Code Table Maintenance
 5. Security

F1=HELP F3=EXIT

REQUIRED ACTION:

Key the number corresponding to the menu of choice, press <ENTER>

Y092

DMH - CTRAC Main Menu

MM-DD-YYYY

HH:MM:SS

Select the appropriate option : __
Enter Facility or Provider Number and press ENTER.

Facility : ____ Provider No. : _____

- | | |
|--|------------------------|
| 10 - Client Demographics/Search | |
| 15 - New Admissions/Readmissions/Waiting | |
| 20 - Sub Menu : Demographics | Charts |
| Chart Provider Episodes | Commitments/Admissions |
| Diagnosis | Program Episodes |
| Ward Episodes | Child Assessments |
| Standard Means Test | ISAP Assessments |
| 25 - Staff | |
| 30 - Client Batch Match | |
| 40 - Active Clients | |
| 50 - Demographics Changes Report | |
| 70 - Code Tables | |
| 99 - DMH Menu | |

F1=HELP F5=DEFAULT-VALUES F15=DMH-MENU

REQUIRED ACTION:

Key Option, press <ENTER>

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CTRAC Online User's Guide

GENERAL PROCEDURES/INFORMATION

ACTION LINE

ADD (A) PROCEDURE:

1. When needing to add additional episodes to a Client record, from the DMH - CTRAC SUB-MENU - choose Option 30 - Provider Episode.
NOTE: In order to add a Demographic record, a Chart, or a new Provider Episode, the User must readmit the Client using Option 15 - Admissions/Readmissions/Waiting from the DMH - CTRAC MAIN MENU.
2. At the "List/Select" screen, select the Provider Episode which will be affected. [Refer to SELECT (on a 'List/Select') screen, on Screen Functions – Page 12.]
3. Using the appropriate Function (F) Key, choose the episode to be added.
4. On that episode "List/Select" screen, press F2=DETAIL. An unpopulated screen of the episode to be added will display.
5. Key 'A' (Add) on the Action Line and the remaining required data, and press <ENTER>.
6. An Information message should appear stating the episode has been added.
7. Return to the DMH - CTRAC SUB-MENU to continue updating other Client information, or DMH – CTRAC MAIN MENU to exit.

UPDATE (U):

An "Update" is done when the record, i.e. Program Episode, is already in the system and a field needs to be modified, i.e., keying a closing date/time.

PROCEDURE:

1. Access the appropriate episode and key 'U' (Update) on the Action Line.
2. Update the field(s) and press <ENTER>.
3. An Information message will appear on the screen stating the Episode was "Successfully UPDATED".
4. Continue updating any additional fields in the Client record.
5. Return to the DMH - CTRAC SUB-MENU to continue updating other Client information, or DMH – CTRAC MAIN MENU to exit.

DELETE (D):

The User can utilize the Delete Procedure if given Level 4 access to the function in which they are trying to delete. The User will need to check their Department of Mental Health Information Systems Access Request form if unable to 'Delete' the desired episode from a Client record. The Division of Alcohol and Drug Abuse recommends that at least two (2) individuals who work with the data have this access. However, no Provider is limited to the number of Users assigned this capability.

PROCEDURE:

On any episode screen which has 'Delete (D)' on the Action Line:

1. Key 'D' on the Action Line and press <ENTER>.
2. Prompt will appear to confirm the delete action, see message line on bottom of screen.
3. To confirm delete action, key Y (YES) or N (NO) and press <ENTER>.
4. An Information message will appear on the screen stating the Episode was "Successfully Deleted".

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GENERAL PROCEDURES/INFORMATION

SCREEN ID'S

In the Detailed Procedures section, references will be made to a Screen Id after the screen name -i.e. (Y092) in the top left corner of the screen. Each screen will have it's own unique identifier which we sometimes refer to when speaking with users concerning problems they may have on different screens.

FUNCTIONS

F KEYS:

To get to a Function key higher than F12 if End User keyboard only goes to F12 (See Page 16 - F Keys Conversion):

PROCEDURE:

- While holding down the 'Shift' key, press whichever function key, that when added to 12 will be the needed F(unction) key. (Example: Shift and F5 will result in F17.)

SELECT (ON A 'LIST/SELECT' SCREEN):

PROCEDURES:

1. On any screen which displays a list of items, i.e. Provider Episode Lists, etc., key a '/' on the line in front of the episode needed.
2. Press F2=DETAIL. This will take the End User into the selected episode.

PROMPT:

A "+" to the right of a field indicates there is a code table to which the End User can prompt for a valid code or additional information on the existing code.

PROCEDURES:

1. Key '=' in the available space to the right of the field being prompted, press F4=PROMPT.
2. The appropriate code table will appear.
3. Utilizing the instructions at the top of the screen for selecting a code and returning, make the correct selection and return.
4. Continue with screen.

SELECT (ON A CODE TABLE AND RETURN WITH THE INFORMATION):

PROCEDURES:

1. Key a '/' on the line in front of the code needed, press F3=RETURN to return to the episode with the response. The cursor should remain on the prompted code.
2. To return to the episode without making a selection, press F12=CANCEL.

TIMES

All Times are in military (24 hour) format.

FUNCTION KEYS DEFINITIONS

| | |
|--------------|--|
| F1=HELP | Gives additional tips for each screen and also F11=WHO-TO-CALL. |
| F2=DETAIL | Used on a "LIST/SELECT" screen to view additional information on the episode selected. F2 is also used when adding a record such as a Program Episode to get an unpopulated screen. |
| F3=RETURN | When prompting on a code table screen, insert appropriate symbol and use F3 to return to previous screen to insert selected option. F3 also returns the User to the previous screen. |
| F4=PROMPT | After User inserts "=" on prompt fields, F4 takes User to prompted code's "LIST/SELECT" screen. |
| F5=CLEAR | Empties all keyed fields on the screen. |
| F6=REFRESH | Resets the screen showing immediate changes. |
| F7=BWD | Scrolls backward. Only functional where there is "MORE -" in lower right corner of screen. |
| F8=FWD | Scrolls screen forward. Only functional where there is "MORE +" in the lower right corner of screen. |
| F9=HOME | Returns User to last major screen. |
| F10 | Variable |
| F11 | Variable |
| F12=CANCEL | Terminates process. Also used to exit a code table without bringing data to populate the field. |
| F13=SUB-MENU | Returns User to the DMH - CTRAC SUB-MENU. |
| F14 | Variable |
| F15=MENU | Returns User to the DMH – CTRAC MAIN MENU. |
| F16 thru F24 | Variable |

FUNCTION KEYS CONVERSION

| Desired Function | Standard 101-key Keyboard (pc) | 5250 Keyboard with 24 function keys |
|------------------|--------------------------------|-------------------------------------|
| Enter | Enter on Numeric Pad | Enter |
| F13 | Shift +F1 | F13 |
| F14 | Shift +F2 | F14 |
| F15 | Shift +F3 | F15 |
| F16 | Shift + F4 | F16 |
| F17 | Shift + F5 | F17 |
| F18 | Shift + F6 | F18 |
| F19 | Shift + F7 | F19 |
| F20 | Shift + F8 | F20 |
| F21 | Shift + F9 | F21 |
| F22 | Shift + F10 | F22 |
| F23 | Shift + F11 | F23 |
| F24 | Shift + F12 | F24 |

For example: to key F13, press the Shift and F1 keys at the same time.

To make using all the function keys a little easier:

- Copy this page, then cut along the lines to the right to make a template strip for your keyboard.
- Place the template strip along the top of your keyboard, arranged to help quickly identify all the shifted function keys.

F13
F1
F14
F2
F15
F3
F16
F4
F17
F5
F18
F6
F19
F7
F20
F8
F21
F9
F22
F10
F23
F11
F24
F12

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HOW TO: ADMIT a CPS or MRDD Division Client

Follow the SUPERSESSION LOG-ON PROCEDURES – Page 9-11.

1. Page A-4 -- On the DMH - CTRAC MAIN MENU screen (Y092), choose Option 15 (New Admissions/Readmissions/Waiting) and press <ENTER>.
2. Page A-5 -- Key the required fields on the DMH CLIENT ADMISSION SEARCH screen (Y093) and press <ENTER>.

Note: Do not key Chart Number on this screen for a **first** admission to your Provider.

3. Page A-6 -- On the CLIENT NAME LIST/SELECT screen (Y094), review the list to see if the client is currently in the system.
 - If yes, select that client and press F2.
 - If no, select 'New Admission' and press F2.
 - If unsure, you can tentatively select a client, review the demographics and return to the Client Select screen.
4. Page A-7 -- On the CLIENT ADMISSION screen (Y066), key client information and press <ENTER>. **NOTE:** Some of the required fields for this screen have already been keyed on DMH Client Admission Search (Y093) and carried over. You may want to enter or update client address and telephone number in addition to other optional demographic information.
5. Page A-8 -- On the CLIENT ADMISSION (ADDITIONAL) screen (Y067), all the information is optional on this screen. Updates cannot be made to data above the starred line. After updating or keying information press <ENTER>.
6. Page A-9 -- On the CLIENT PREFERRED LANGUAGE ADMISSION screen (Y232), key Preferred Language Group code and press <ENTER>.
7. Page A-10 -- On the CLIENT CHART ADMISSION screen (Y115), key the required fields and press <ENTER>.
8. Page A-11 -- On the PROVIDER EPISODE ADMISSION screen (Y119), key the required fields and press <ENTER>.
9. Page A-12 -- On the ADMISSION/COMMITMENT ADMISSION screen (Y125), key the required fields and press <ENTER>.
10. Page A-15 -- The PROVIDER EPISODE ADMISSION screen (Y119) displays again. If there is need for Program Episodes for more than one Division, additional Admission/Commitment episodes can be added for the additional Division(s) at this time - see directions on next page. Diagnosis Episodes can also be added at this time - see directions on next page.

NOTE: There must be an ADMISSION/COMMITMENT ADMISSION EPISODE for each Division which will have Program Episodes.

CTRAC Online User's Guide

HOW TO: ADMIT a CPS or MRDD Division Client (cont.)

To add Diagnosis Episodes.

- Press F17=DIAGNOSIS
- Press F2=Detail
- Key 'A' on the Action Line and key the required fields
- When all have been keyed, press <ENTER> to transmit screen
- When Information message of "Successfully Added" appears, F9=Home to return to the Provider Episode Admission screen.

To add additional Admission/Commitment Admission episodes:

- Press F20=Admission/Commitment
- Press F2=Detail
- Key 'A' on the Action Line and key the required fields
- When all have been keyed, press <ENTER> to transmit screen
- When Information message of "Successfully Added" appears, F3=Return in order to repeat the above steps to add a third Division Admission/Commitment Admission episode. If no third Division Admission/Commitment Admission episode need to be added, F9=Home to return to the Provider Episode Admission screen.

If no additional Admission/Commitment Admission or Diagnosis episodes need to be keyed, press <ENTER> to continue with the Admission Process.

11. Page A-16 -- On the PROGRAM EPISODE ADMISSION screen (Y211), key the required fields and press <ENTER>.

CONTRACT PROVIDERS ONLY:

12. Page A-20 -- When the PROGRAM EPISODE ADMISSION screen is completed and the User has pressed <ENTER>, the DMH Client Maintenance screen appears along with the message "Admission Completed Successfully."

STATE OWNED PROVIDERS - CPS AND MRDD DIVISIONS:

12. Page A-17 -- On the PROGRAM WARD EPISODE ADMISSION screen (Y212), key the required fields and press <ENTER>.
13. Page A-20 -- When the PROGRAM WARD EPISODE ADMISSION screen is completed and the User has pressed <ENTER>, the DMH CLIENT MAINTENANCE screen appears along with the message "Admission Completed Successfully."

IF THERE IS NO NEED FOR ADDITIONAL PROGRAM EPISODES:

F15=Main to go to the DMH - CTRAC MAIN MENU to either exit the system or begin the next admission.

IF THERE IS A NEED FOR ADDITIONAL PROGRAM EPISODES:

F13=SUB-MEN to go to the DMH - CTRAC SUB-MENU and add the Program Episode.

CTRAC Online User's Guide

HOW TO: ADMIT a CPS OUTPATIENT (FASTRAK) Client

Follow the SUPERSESSION LOG-ON PROCEDURES – Page 9-11.

1. Page A-4 -- On the DMH - CTRAC MAIN MENU screen (Y092), choose Option 15 (New Admissions/Readmissions/Waiting) and press <ENTER>.
2. Page A-5 -- Key the required fields on the DMH CLIENT ADMISSION SEARCH screen (Y093) and press <ENTER>.

Note: Do not key Chart Number on this screen for a **first** admission to your Provider.

3. Page A-6 -- On the CLIENT NAME LIST/SELECT screen (Y094), review the list to see if the client is currently in the system.
 - If yes, select that client and press F2.
 - If no, select 'New Admission' and press F2.
 - If unsure, you can tentatively select a client, review the demographics and return to the Client Select screen.
4. Page A-7 -- On the CLIENT ADMISSION screen (Y066), key client information and press <ENTER>. **NOTE:** Some of the required fields for this screen have already been keyed on DMH Client Admission Search (Y093) and carried over. You may want to enter or update client address and telephone number in addition to other optional demographic information.
5. Page A-8 -- On the CLIENT ADMISSION (ADDITIONAL) screen (Y067), all the information is optional on this screen. Updates cannot be made to data above the starred line. After updating or keying information <Enter>.
6. Page A-9 -- On the CLIENT PREFERRED LANGUAGE ADMISSION screen (Y232), key Preferred Language Group code and press <ENTER>.
7. Page A-10 -- On the CLIENT CHART ADMISSION screen (Y115), key the required fields and choose **F20=CPS OUTPAT-ADMIT**. **Do not** <enter> as this will proceed with a normal admission.
8. Page A-21 -- On the CPS OUTPATIENT ADMISSION screen (Y220), key the information and press <ENTER>.

Reminder: The Treatment Program Code must have a Class of 0 (outpatient) in order for the code to be used in this process.

9. When the Information Message "Press ENTER to complete admission or F17 for Diagnosis" is displayed, the Diagnosis Episode may be added to the client record. Otherwise press <ENTER>.
10. If the Diagnosis Episode is added, F9=HOME to return to the CPS OUTPATIENT ADMISSION screen and press <ENTER>.
11. Page A-20 -- The CLIENT MAINTENANCE screen (Y066) displays with the Information Message "Admission Completed Successfully".

CTRAC Online User's Guide

HOW TO: ADMIT an ADA Division Client

Follow the SUPERSESSION LOG-ON PROCEDURES – Page 9-11.

1. Page A-4 -- On the DMH - CTRAC MAIN MENU screen (Y092), choose Option 15 (New Admissions/Readmissions/Waiting) and press <ENTER>.
2. Page A-5 -- Key the required fields on the DMH CLIENT ADMISSION SEARCH screen (Y093) and press <ENTER>.

Note: Do not key Chart Number on this screen for a **first** admission to your Provider.

3. Page A-6 -- On the CLIENT NAME LIST/SELECT screen (Y094), review the list to see if the client is currently in the system.
 - If yes, select that client and press F2.
 - If no, select 'New Admission' and press F2.
 - If unsure, you can tentatively select a client, review the demographics and return to the Client Select screen.
4. Page A-7 -- On the CLIENT ADMISSION screen (Y066), key client information and press <ENTER>. **NOTE:** Some of the required fields for this screen have already been keyed on DMH Client Admission Search (Y093) and carried over. You may want to enter or update client address and telephone number in addition to other optional demographic information.
5. Page A-8 -- On the CLIENT ADMISSION (ADDITIONAL) screen (Y067), all the information is optional on this screen. Updates cannot be made to data above the starred line. After updating or keying information <Enter>.
6. Page A-9 -- On the CLIENT PREFERRED LANGUAGE ADMISSION screen (Y232), key Preferred Language Group code and press <ENTER>.
7. Page A-10 -- On the CLIENT CHART ADMISSION screen (Y115), key the required fields and press <ENTER>.
8. Page A-11 -- On the PROVIDER EPISODE ADMISSION screen (Y119), key the required fields and press <ENTER>.
9. Page A-12 -- On the ADMISSION/COMMITMENT ADMISSION screen (Y125), key the required fields and press <ENTER>.
10. Page A-13 -- On ADA ADDITIONAL DEMOGRAPHICS ADMISSION screen (Y126), key the required fields and press <ENTER>.
11. Page A-14 -- On the ADA PUBLIC ASSISTANCE ADMISSION screen (Y225), key at least one Public Assistance Code and press <ENTER>.
12. Page A-15 -- The PROVIDER EPISODE ADMISSION screen (Y119) displays again. If additional Admission/Commitments or Diagnosis Episodes are needed they may be added at this time - see directions on next page.

CTRAC Online User's Guide

HOW TO: ADMIT an ADA Division Client (cont.)

To add Diagnosis Episodes.

- Press F17=DIAGNOSIS
- Press F2=Detail
- Key 'A' on the Action Line and key the required fields
- When all have been keyed, press <ENTER> to transmit screen
- When Information message of "Successfully Added" appears, F9=Home to return to the Provider Episode Admission screen.

To add additional Admission/Commitment Admission episodes:

- Press F20=Admission/Commitment
- Press F2=Detail
- Key 'A' on the Action Line and key the required fields.
- When all have been keyed, press <ENTER> to transmit screen
- When Information message of "Successfully Added" appears, F3=Return in order to repeat the above steps to add a third Division Admission/Commitment Admission episode. If no third Division Admission/Commitment Admission episode need to be added, F9=Home to return to the Provider Episode Admission screen.

If no additional Admission/Commitment Admission or Diagnosis episodes need to be keyed, press <ENTER> to continue with the Admission Process.

13. Page A-16 -- On the PROGRAM EPISODE ADMISSION screen (Y211), key the required fields and press <ENTER>.

CONTRACT PROVIDERS - ADA DIVISION: (AFTER PAGE A-16)

14. Page A-18 -- On the PROGRAM ADA STATISTICS ADMISSION screen (Y204), key the required fields and press <ENTER>.
15. Page A-19 -- On the ADA SUBSTANCE ABUSE ADMISSION screen (Y205), key the required fields and press <ENTER>.
16. Page A-20 -- When the ADA SUBSTANCE ABUSE ADMISSION screen is completed and the User has pressed <ENTER>, the DMH Client Maintenance screen appears along with the message "Admission Completed Successfully."

CTRAC Online User's Guide

HOW TO: ADMIT an ADA Division Client (cont.)

STATE OWNED PROVIDERS - ADA DIVISION: (AFTER PAGE A-16)

14. Page A-17 -- On the PROGRAM WARD EPISODE ADMISSION screen (Y212), key the required fields and press <ENTER>.
15. Page A-18 -- On the PROGRAM ADA STATISTICS ADMISSION screen (Y204), key the required fields and press <ENTER>.
16. Page A-19 -- On the PROGRAM ADA SUBSTANCE ABUSE ADMISSION screen (Y205), key the required fields and press <ENTER>.
17. Page A-20 -- When the PROGRAM ADA SUBSTANCE ABUSE ADMISSION screen is completed and the User has pressed <ENTER>, the DMH CLIENT MAINTENANCE screen appears along with the message "Admission Completed Successfully."

IF THERE IS NO NEED FOR ADDITIONAL PROGRAM EPISODES:

F15=Main to go to the DMH - CTRAC MAIN MENU to either exit the system or begin the next admission.

IF THERE IS A NEED FOR ADDITIONAL PROGRAM EPISODES:

F13=SUB-MEN to go to the DMH - CTRAC SUB-MENU and add the Program Episode.

CTRAC Online User's Guide

HOW TO: ADMIT an ADA SCREENING Client

FasTrak

Follow the SUPERSESSION LOG-ON PROCEDURES – Page 9-11.

1. Page A-4 -- On the DMH - CTRAC MAIN MENU screen (Y092), choose Option 15 (New Admissions/Readmissions/Waiting) and press <ENTER>.
2. Page A-5 -- Key the required fields on the DMH CLIENT ADMISSION SEARCH screen (Y093) and press <ENTER>.

Note: Do not key Chart Number on this screen for a **first** admission to your Provider.

3. Page A-6 -- On the CLIENT NAME LIST/SELECT screen (Y094), review the list to see if the client is currently in the system.
 - If yes, select that client and press F2.
 - If no, select 'New Admission' and press F2.
 - If unsure, you can tentatively select a client, review the demographics and return to the Client Select screen.
4. Page A-7 -- On the CLIENT ADMISSION screen (Y066), key client information and press <ENTER>. **NOTE:** Some of the required fields for this screen have already been keyed on DMH Client Admission Search (Y093) and carried over. You may want to enter or update client address and telephone number in addition to other optional demographic information.
5. Page A-8 -- On the CLIENT ADMISSION (ADDITIONAL) screen (Y067), all the information is optional on this screen. Updates cannot be made to data above the starred line. After updating or keying information press <ENTER>.
6. Page A-9 -- On the CLIENT PREFERRED LANGUAGE ADMISSION screen (Y232), key Preferred Language Group code and press <ENTER>.
7. Page A-10 -- On the CLIENT CHART ADMISSION screen (Y115), key the required fields and choose **F22=ADA SCREENING**. **Do not** <ENTER> as this will proceed with a normal ADA admission.
8. Page A-22 -- When the ADA SCREENING screen (Y240) is displayed, key the information and press <ENTER>.
9. Page A-20 -- The CLIENT MAINTENANCE screen (Y066) is displayed with the Information Message "Admission Completed Successfully".

VI. HOW TO: REGISTER/SCREEN a Client

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|---|
| Follow the SUPERSESSION LOG-ON PROCEDURES – Page 9-11. |
|---|

ALL DIVISIONS

1. Page A-4 --On the DMH - CTRAC MAIN MENU choose Option 15 (New Admissions/Readmissions/Waiting), press <ENTER>.
2. Page A-5 -- Key the required information on the DMH CLIENT ADMISSION SEARCH screen (Y093) and press <ENTER>.
3. Page A-6 -- On the CLIENT NAME LIST/SELECT screen (Y094), review the list to see if the client is currently in the system.
 - If yes, select that client and press F2.
 - If no, select 'New Admission' and press F2.
 - If unsure, you can tentatively select a client, review the demographics and return to the Client Select screen.
4. Page A-7 -- On the CLIENT ADMISSION screen (Y066), key the client information and press <ENTER>. **NOTE:** Some of the required fields for this screen have already been keyed on DMH CLIENT ADMISSION SEARCH (Y093) and carried over. You may want to enter or update client address and telephone number in addition to other optional demographic information.
5. Page A-8 -- On the CLIENT ADMISSION (ADDITIONAL) screen (Y067), all the information is optional on this screen. Updates cannot be made to data above the starred line. After updating or keying information press <ENTER>.
6. Page A-9 -- On the CLIENT PREFERRED LANGUAGE ADMISSION screen (Y232), key Preferred Language Group code and press <ENTER>.
7. Page A-10 -- On the CLIENT CHART ADMISSION screen (Y115), key the required fields and press <ENTER>.
8. Page A-11 -- On the PROVIDER EPISODE ADMISSION screen (Y119), key the required fields and press <ENTER>.
9. Page A-12 -- On the ADMISSION/COMMITMENT ADMISSION screen (Y125), key the required fields and press <ENTER>.

| |
|---|
| NOTE: When registering a Client, on the “ Admission/Commitment Admission ” screen key ‘ TYPE ’ = 130 [Non-Admission (Screening/Waiting)]. |
|---|

10. Page A-15 -- The PROVIDER EPISODE ADMISSION screen (Y119) displays again. Press <ENTER> to proceed with registration.

CTRAC Online User's Guide

VII. HOW TO: REGISTER/SCREEN a Client (cont.)

11. Page A-16 -- On the PROGRAM EPISODE ADMISSION screen (Y211), key the required fields and press <ENTER>.

NOTE:

ADA - On the “**Program Episode Admission**” screen key the ‘**TREATMENT PGM CD**’ = **101** [ADA Registration].

CPS - On the “**Program Episode Admission**” screen key the ‘**TREATMENT PGM CD**’ = **081** [CPS Screening].

MRDD - On the “**Program Episode Admission**” screen key the ‘**TREATMENT PGM CD**’ = **357** [MRDD Registration].

12. Page A-20 -- When the “Program Episode Admission” screen is completed and the User has pressed <Enter> the DMH CLIENT MAINTENANCE screen appears along with the message “Admission Completed Successfully.”

The Client is now registered on the CTRAC system.

When the Client is to be admitted for treatment services, the User goes through Option 30 (Provider Episode) on the DMH - CTRAC SUB-MENU, to close the Registration Program Episode and open the appropriate treatment Program Episode.

REMINDER:

Always, after the required data has been keyed on each screen, press <ENTER> to advance to the next screen. The system will automatically take the User through the appropriate screens in the correct order.

CTRAC Online User's Guide

HOW TO: ADMIT a PREVENTION/INTERVENTION Client **Division of Alcohol and Drug Abuse**

Follow the SUPERSESSION LOG-ON PROCEDURES – Page 9-11.

NOTE: 1) CTRAC is not case sensitive. Key the data in lower case since everything goes to upper case when the data is transmitted <ENTER>. 2) During the Admission Process, the system will automatically take the User through the appropriate screens. After the required information has been keyed, press <ENTER> to advance to the next screen.

1. Page A-4 -- On the DMH - CTRAC MAIN MENU screen (Y092), key 15 (New Admissions/Readmissions/Waiting) and press <ENTER>.
2. Page A-5 -- Key the required information on the DMH CLIENT ADMISSION SEARCH screen (Y093) and press <ENTER>.

Note: Do not key Chart Number on this screen for a **first** admission to your Provider.

3. Page A-6 -- On the CLIENT NAME LIST/SELECT screen (Y094), review the list to see if the client is currently in the system.
 - If yes, select that client and press F2.
 - If no, select 'New Admission' and press F2.
 - If unsure, you can tentatively select a client, review the demographics and return to the Client Select screen.
4. Page A-7 -- When the CLIENT ADMISSION screen (Y066) is displayed, key the Social Security Number, if available.
 - Key the current address of the client.

NOTE: If a client has no address use 'Homeless' on the Street line and include the City and State. A homeless client is using resources in a community, so please indicate which community.
 - When completed press <ENTER>.
5. Page A-8 -- Key and data you may have on CLIENT ADMISSION ADDITIONAL screen (Y067) and press <ENTER>.
6. Page A-9 -- On the CLIENT PREFERRED LANGUAGE ADMISSION screen (Y232), key Preferred Language Group Code and press <ENTER>.
7. Page A-10 -- On the CLIENT CHART ADMISSION screen (Y115), key required data and press <ENTER>.

NOTE: Since your contract is with the Division of Alcohol and Drug Abuse, your Division Code will always be 'A'.

CTRAC Online User's Guide

HOW TO: ADMIT a PREVENTION/INTERVENTION Client (cont.)

8. Page A-11 -- Key the data on the the PROVIDER EPISODE ADMISSION screen (Y119) and press <ENTER>.

Admission while Discontinuing Procedures

Simply enter Discontinuation Date, Discontinuation Time, Discontinuation Status & Discontinuation Referral while on the PROVIDER EPISODE ADMISSION screen (Y119).

9. Page A-12 -- Key the data on the ADMISSION/COMMITMENT ADMISSION screen (Y125) and press <ENTER>.

NOTE: Due to the type of contract your Provider has, on the “Admission/Commitment Admission” screen the 'TYPE' = **130** [Non-Admission (Screening/Waiting)].

10. Page A-15 -- The PROVIDER EPISODE ADMISSION screen (Y119) displays again. Press <ENTER> to proceed with the admission.
11. Page A-16 -- Key data on the PROGRAM EPISODE ADMISSION screen (Y211) and press <ENTER>.

NOTE: On the Program Episode Admission screen, the ‘TREATMENT PGM CD’ = **133** [ADA Prevention]; ‘LOCATION’ - Prompt for appropriate Location Number.

12. Page A-20 -- When the PROGRAM EPISODE ADMISSION screen is completed and the User has pressed <ENTER>, the DMH CLIENT MAINTENANCE screen appears along with the message “Admission Completed Successfully.”

The Client is now registered on the CTRAC system. Invoicing can be done the next day.

CTRAC Online User's Guide

HOW TO: ADMIT an ADA WEEKEND INTERVENTION (WIP) Client

Follow the SUPERSESSION LOG-ON PROCEDURES – Page 9-11.

1. Page A-4 -- On the DMH - CTRAC MAIN MENU screen (Y092), choose Option 15 (New Admissions/Readmissions/Waiting) and press <ENTER>.
2. Page A-5 -- Key the required fields on the DMH CLIENT ADMISSION SEARCH screen (Y093) and press <ENTER>.

Note: Do not key Chart Number on this screen for a **first** admission to your Provider.

3. Page A-6 -- On the CLIENT NAME LIST/SELECT screen (Y094), review the list to see if the client is currently in the system.
 - If yes, select that client and press F2.
 - If no, select 'New Admission' and press F2.
 - If unsure, you can tentatively select a client, review the demographics and return to the Client Select screen.
4. Page A-7 -- On the CLIENT ADMISSION screen (Y066), key client information and press <ENTER>. **NOTE:** Some of the required fields for this screen have already been keyed on DMH CLIENT ADMISSION SEARCH (Y093) and carried over. You may want to enter or update client address and telephone number in addition to other optional demographic information.
5. Page A-8 -- On the CLIENT ADMISSION (ADDITIONAL) screen (Y067), all the information is optional on this screen. Updates cannot be made to data above the starred line. After updating or keying information <Enter>.
6. Page A-9 -- On the CLIENT PREFERRED LANGUAGE ADMISSION screen (Y232), key Preferred Language Group code and press <ENTER>.
7. Page A-10 -- On the CLIENT CHART ADMISSION screen (Y115), key the required fields and press <ENTER>.
8. Page A-11 -- On the PROVIDER EPISODE ADMISSION screen (Y119), key the required fields and press <ENTER>.

Admission while Discontinuing Procedures

Simply enter Discontinuation Date, Discontinuation Time, Discontinuation Status & Discontinuation Referral while on the PROVIDER EPISODE ADMISSION screen (Y119).

CTRAC Online User's Guide

HOW TO: ADMIT an ADA WEEKEND INTERVENTION (WIP) Client (cont.)

9. Page A-12 -- On the ADMISSION/COMMITMENT ADMISSION screen (Y125), key the required fields and press <ENTER>.

REMINDER: When admitting a Client to WIP, on the "Admission/Commitment Admission" screen, 'Type' = **130** [Non-Admission (Screening/Waiting)].

10. Page A-15 -- The PROVIDER EPISODE ADMISSION screen (Y119) displays again. <ENTER> to proceed with the admission.
11. Page A-16 -- On the PROGRAM EPISODE ADMISSION screen (Y211), key the required fields and press <ENTER>.

REMINDER: When admitting a Client to WIP, on the "Program Episode Admission" screen, 'Treatment Pgm Cd' = **133** [ADA Prevention].

12. Page A-20 -- When the PROGRAM EPISODE ADMISSION screen is completed and the User has pressed <ENTER> the DMH CLIENT MAINTENANCE screen appears along with the message "Admission Completed Successfully."

The Client is now admitted to WIP on the CTRAC system.

When the Client is to be admitted for treatment services go through the Option 30 (Provider Episode) on the DMH - CTRAC SUB-MENU. Close the Program Episode for WIP and open the ADA Program Episode for the appropriate treatment.

REMINDER:

- Use the tab key when moving from field to field on the screen.
- Read the prompts at the top and bottom of the screens.
- Use the Function (F) keys listed at the bottom of the Episode screens for easy movement through the Client's record.

CTRAC Online User's Guide

HOW TO: DISCONTINUE a CLIENT

Division of CPS, MRDD, (and ADA PREVENTION/INTERVENTION/WIP)

NOTE: Discontinuing the Client from the Provider Episode will close all 'open' episodes for this Provider Episode.

If the client was not discontinued during the admission procedure, discontinue the client with the following steps...

1. Page A-23 -- On the DMH - CTRAC MAIN MENU screen (Y092), key option 20 for the DMH - CTRAC SUB-MENU and press <ENTER>.
2. Page A-24 -- On the DMH - CTRAC SUB-MENU screen (Y124)
 - Key the Client State Id or Chart Number
 - Key Option 30 (Provider Episode) and press <ENTER>.
3. Page A-42 -- On the PROVIDER EPISODE LIST/SELECT screen (Y108), select the Provider Episode to be discontinued using the directions at the top of the screen.
4. Page A-42 -- On the PROVIDER EPISODE MAINTENANCE screen (Y109)
 - Key a 'U' on the Action Line
 - Tab down to the Discontinuation Date, Time, Status, and Referral and enter correct information and press <ENTER>.
5. If requested, enter a 'Y' to proceed.

When the Information message "Successfully Updated" appears, use the appropriate function key to return to the DMH - CTRAC SUB-MENU to continue with other client records, or to the DMH - CTRAC MAIN MENU to exit the CTRAC system.

NOTE: If the Client returns to your Provider for readmission, use Option 15 on the DMH - CTRAC MAIN MENU to readmit the Client.

CTRAC Online User's Guide

HOW TO: DISCONTINUE an ADA Client

DIVISION OF ALCOHOL & DRUG ABUSE

1. Page A-23 -- On the DMH - CTRAC MAIN MENU screen (Y092), key option 20 for the DMH - CTRAC SUB-MENU and press <ENTER>.
2. Page A-24 -- On the DMH - CTRAC SUB-MENU (Y124):
 - Key the Client State Id or Chart Number.
 - Key Option 30 (Provider Episode), press <ENTER>.
3. Page A-42 -- On the PROVIDER EPISODE LIST/SELECT screen (Y108), select the Provider Episode to be discontinued using the directions at the top of the screen.
4. Page A-42 -- On the PROVIDER EPISODE MAINTENANCE screen (Y109), press F19 to get to "Program Episode List/Select" screen (Y182).
5. Page A-47 -- On the PROGRAM EPISODE LIST/SELECT screen (Y182), select the Program Episode in ADA that needs to be closed. / F2=Detail.
6. Page A-47 -- On the PROGRAM EPISODE MAINTENANCE screen (Y183)
 - Key 'U' (Update) on the Action line.
 - Tab down and key the Closing Date and Closing Time, press <ENTER>.
7. Page A-50 -- The PROGRAM ADA STATISTICS MAINTENANCE screen (Y189) will appear. Key the required information on closing the Statistics, press <ENTER>.
8. Page A-51 -- The PROGRAM ADA SUBSTANCE ABUSE MAINTENANCE screen (Y190) will appear. Key the closing Primary, Secondary, and Tertiary substances of abuse as needed and press <ENTER>.
9. Message appearing on the Screen will state the Program Episode was updated successfully.
10. Use F9 to return to the PROVIDER EPISODE MAINTENANCE screen (Y109) then:
 - Key 'U' (Update) on the Action line.
 - Tab down and key the Discontinuation date, time, status, and referral (transfer reason is optional), and press <ENTER>.
11. If requested, 'Do you really want to discontinue the client Y (Yes) or N (No)'. Key the appropriate response and press <ENTER>.
12. Page A-46 -- The ADA ADDITIONAL DEMOGRAPHIC MAINTENANCE screen (Y121) will be displayed. Key the required information, and press <ENTER>.
13. Message appearing on the Screen will state the Episode was successfully updated.

REMINDER: ADA Program Episodes and Substance Abuse Episodes must be closed **prior** to doing the discontinuation on the Provider Episode Maintenance.

If the Client returns to your Provider for readmission, use Option 15 on the DMH - CTRAC MAIN MENU to readmit the client.

CTRAC Online User's Guide

HOW TO: ADD a DIAGNOSIS

ALL DIVISIONS – DURING THE ADMISSION PROCESS:

1. Page A-15 -- When the End User is keying a Client onto CTRAC through Option 15 (New Admissions/Readmissions/Waiting) on the DMH – CTRAC MAIN MENU, the PROVIDER EPISODE ADMISSION screen (Y119), will reappear along with the message: "To continue press ENTER". Instead of <ENTER> and continuing with the Admission process, press F17=DIAGNOSIS.
2. Page A-45 -- On the DIAGNOSIS EPISODE LIST/SELECT screen (Y146), press F2=DETAIL for a non populated Diagnosis Episode List/Maintenance (Y148) screen.
 - Key 'A' (Add) on the Action line and continue keying client data.

NOTE: The Clinician SSN is required for State Providers. If Contracted Providers choose to key this information, the Clinician must be entered on Staff, option 25 from DMH - CTRAC MAIN MENU.

- When all required data has been keyed, press <ENTER>.
3. The message "Successfully Added" will appear.
 4. F9=HOME to return to the PROVIDER EPISODE ADMISSION screen (Y119).
 5. On the PROVIDER EPISODE ADMISSION screen (Y119), press <ENTER> to continue with the admission process.

REMINDER: The Diagnosis Begin Date and Time cannot be prior to the Provider Episode Begin Date and Time.

CTRAC Online User's Guide

HOW TO: ADD a DIAGNOSIS (cont.)

ALL DIVISIONS - ADDING AFTER ADMISSION PROCESS:

1. Page A-23 -- On the DMH - CTRAC MAIN MENU screen (Y092), key option 20 for the DMH - CTRAC SUB-MENU and press <ENTER>.
2. Page A-24 -- On the DMH - CTRAC SUB-MENU (Y124):
 - Key the Client State Id or Chart Number,
 - Key Option 30 - Provider Episode and press <ENTER>.
3. Page A-42 -- On the PROVIDER EPISODE LIST/SELECT screen (Y108), select the Provider Episode to which the Diagnosis needs to be added.
4. Page A-42 -- On the PROVIDER EPISODE MAINTENANCE screen (Y109), press F17=DIAGNOSIS to go to the Diagnosis Episode List/Select screen.
5. Page A-45 -- On the DIAGNOSIS EPISODE LIST/SELECT screen (Y146), press F2=DETAIL for a non populated DIAGNOSIS EPISODE LIST/MAINTENANCE screen (Y148).
 - Key 'A' (Add) on the Action line and continue keying client data.

NOTE: The Clinician SSN is required for State Providers. If Contracted Providers choose to key this information, the Clinician must be entered on Staff, option 25 from DMH – CTRAC MAIN MENU.

- When all required data has been keyed, press <ENTER>.
6. The message "Successfully Added" will appear.
 7. F9=HOME to return to the PROVIDER EPISODE MAINTENANCE screen.
 8. F9=HOME again to return to the DMH - CTRAC SUB-MENU.
 9. Continue with Step 1. of this section or exit the system.

REMINDER: The Diagnosis Begin Date and Time cannot be prior to the Provider Episode Begin Date and Time.

HOW TO: CLOSE then ADD a NEW PROGRAM EPISODE - ADA

1. Page A-23 -- On the DMH - CTRAC MAIN MENU screen (Y092), key option 20 for the DMH - CTRAC SUB-MENU and press <ENTER>.
2. Page A-24 -- On the DMH - CTRAC SUB-MENU (Y124):
 - Key the Client State Id or Chart Number.
 - Key Option 30 (Provider Episode) and press <ENTER>.
3. Page A-42 -- On the PROVIDER EPISODE LIST/SELECT screen (Y108), select the Provider Episode in which the Program Episode to be closed is located.
4. Page A-42 -- On the PROVIDER EPISODE MAINTENANCE screen (Y109), press F19=PROGRAM-EPIS to get to the Program Episode List/Select screen.
5. Page A-47 -- On the PROGRAM EPISODE LIST/SELECT screen (Y182), select the ADA Program Episode which needs to be closed. / F2=Detail.
6. Page A-47 -- On the PROGRAM EPISODE MAINTENANCE screen (Y183)
 - Key 'U' (Update) on the Action Line.
 - Tab down and key the Close Date and Close Time and press <ENTER>.
7. Page A-50 -- On the PROGRAM ADA STATISTICS MAINTENANCE screen (Y189):
 - 'A' (Add) will already be on the Action line.
 - Key the C=Close information and press <ENTER>.
8. Page A-51 -- On the PROGRAM ADA SUBSTANCE ABUSE MAINTENANCE screen (Y190):
 - 'A' (Add) will already be on the Action line.
 - Key the C=Close information for the substance(s) of abuse and press <ENTER>.
9. Page A-47 -- The PROGRAM EPISODE MAINTENANCE screen (Y183) displays with the message, "Successfully Updated."

The ADA Program Episode has been 'closed'.

Press F3=RETURN to return to the Program Episode List/Select screen.

10. Page A-47 -- On the PROGRAM EPISODE LIST/SELECT screen (Y182), press F2=DETAIL.
11. Page A-47 -- On a non populated PROGRAM EPISODE MAINTENANCE screen (Y183):
 - Key 'A' (Add) on the Action Line.
 - Key opening data onto the screen and press <ENTER>.
12. Page A-50 -- On the PROGRAM ADA STATISTICS MAINTENANCE screen (Y189):
 - 'A' (Add) will already be on the Action line.
 - Key the O=Open information and press <ENTER>.

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HOW TO: CLOSE then ADD a NEW PROGRAM EPISODE – ADA (cont.)

13. Page A-51 -- On the PROGRAM ADA SUBSTANCE ABUSE MAINTENANCE screen (Y190):
 - 'A' (Add) will already be on the Action line.
 - Key the O=Open information for the substance(s) of abuse and press <ENTER>.
14. The PROGRAM EPISODE MAINTENANCE displays with the message, "Successfully Added."

A new ADA Program Episode has been 'opened'.

15. To return to the DMH - CTRAC SUB-MENU:
 - Press F9=HOME to return to the PROVIDER EPISODE MAINTENANCE screen.
 - Press F9=HOME to return to the DMH - CTRAC SUB-MENU.

OR:

16. To return to the DMH - CTRAC MAIN MENU:
 - Press F15=MAIN to return to the DMH - CTRAC MAIN MENU.

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HOW TO: CLOSE then ADD a NEW PROGRAM EPISODE – CPS & MRDD

1. Page A-23 -- On the DMH – CTRAC MAIN MENU screen (Y092), key option 20 for the DMH - CTRAC SUB-MENU and press <ENTER>.
2. Page A-24 -- On the DMH - CTRAC SUB-MENU (Y124):
 - Key the Client State Id or Chart Number.
 - Key Option 30 (Provider Episode) and press <ENTER>.
3. Page A-42 -- On the PROVIDER EPISODE LIST/SELECT screen (Y108), select the Provider Episode in which the Program Episode to be closed is located.
4. Page A-42 -- On the PROVIDER EPISODE MAINTENANCE screen (Y109), press F19=PROGRAM-EPIS to get to the Program Episode List/Select screen.
5. Page A-47 -- On the PROGRAM EPISODE LIST/SELECT screen (Y182), select the Program Episode which needs to be closed. / F2=Detail.
6. Page A-47 -- On the PROGRAM EPISODE MAINTENANCE screen (Y183)
 - Key 'U' (Update) on the Action Line.
 - Tab down and key the Close Date and Close Time and press <ENTER>.
7. Page A-47 -- The PROGRAM EPISODE MAINTENANCE screen (Y183) will give the message, "Successfully Updated."

The Program Episode has been 'closed'.

Press F3=RETURN to return to the Program Episode List/Select screen.

8. Page A-47 -- On the PROGRAM EPISODE LIST/SELECT screen (Y182), press F2=DETAIL.
9. Page A-47 -- On a non populated PROGRAM EPISODE MAINTENANCE screen (Y183):
 - Key 'A' (Add) on the Action Line.
 - Key opening data onto the screen and press <ENTER>.
10. The PROGRAM EPISODE MAINTENANCE displays with the message, "Successfully Added."

A new Program Episode has been 'opened'.

11. To return to the DMH - CTRAC SUB-MENU:
 - Press F9=HOME to return to the PROVIDER EPISODE MAINTENANCE.
 - Press F9=HOME to return to the DMH - CTRAC SUB-MENU.

OR:

12. To return to the DMH – CTRAC MAIN MENU:
Press F15=MAIN to return to the DMH - CTRAC MAIN MENU.

IV. HOW TO: ADD an ADA PROGRAM EPISODE to a CPS Client

When adding an ADA Program Episode for the first time to a Provider Episode which was originally entered as a CPS Division episode, follow these steps:

1. Page A-23 -- On the DMH - CTRAC MAIN MENU screen (Y092), key option 20 for the DMH - CTRAC SUB-MENU and press <ENTER>.
2. Page A-24 -- On the DMH - CTRAC SUB-MENU (Y124):
 - Key the Client State Id or Chart Number.
NOTE: If this is the first ADA episode to be added for this Client at your Provider:
 - a. Key Option 20 (Chart)
 - b. Page A-38 -- On CLIENT CHART LIST/SELECT screen (Y106), select Chart.- / F2=Detail
 - c. Page A-38 -- On CLIENT CHART MAINTENANCE screen (Y107), key 'U' on the action line, tab down to Division and enter 'A' (if not previously entered).
 - d. After successful update, key F9 to return to DMH - CTRAC SUB-MENU, then proceed.
 - Key Option 30 (Provider Episode) and press <ENTER>.
3. Page A-42 -- On the PROVIDER EPISODE LIST/SELECT screen (Y108), select the provider episode which the new ADA Program Episode will be added.
4. Page A-42 -- On the PROVIDER EPISODE MAINTENANCE screen (Y109), press F20=COMMITMENT.
5. Page A-44 -- On the ADMISSION/COMMITMENT LIST/SELECT screen (Y110), press F2=DETAIL, to add a Commitment for ADA.
6. Page A-44 -- On the ADMISSION/COMMITMENT MAINTENANCE screen (Y120):
 - Key 'A' (Add) on the Action Line.
 - Key required ADA commitment data and press <ENTER>.
7. Page A-13 -- On the ADA ADDITIONAL DEMOGRAPHICS ADMISSION screen (Y126), key the required information, press <ENTER>.
8. Page A-14 -- On the ADA PUBLIC ASSISTANCE ADMISSION screen (Y225), key the required information and press <ENTER>.
9. After the "Successfully Added" message:
 - Press F9=HOME to return to the PROVIDER EPISODE MAINTENANCE screen (Y109).
 - Press F19=PROGRAM-EPIS to get to the PROGRAM EPISODE LIST/SELECT screen (Y182).
10. Page A-47 -- On the PROGRAM EPISODE LIST/SELECT screen (Y182), press F2=DETAIL for a non populated Program Episode Maintenance screen.
11. Page A-47 -- On the PROGRAM EPISODE MAINTENANCE screen (Y183):
 - Key 'A' (Add) on the Action Line.
 - Key opening data onto the screen and press <ENTER>.
12. Page A-50 -- On the PROGRAM ADA STATISTICS MAINTENANCE screen (Y189):
 - Key 'A' (Add) on the Action line.
 - Key the O=Open information and press <ENTER>.

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V. HOW TO: ADD an ADA PROGRAM EPISODE to a CPS Client (cont.)

13. Page A-51 -- On the PROGRAM ADA SUBSTANCE ABUSE MAINTENANCE screen (Y190):
 - Key 'A' (Add) on the Action line.
 - Key the O=Open information for the substance(s) of abuse and press <ENTER>.
14. The PROGRAM EPISODE MAINTENANCE displays with the message, "Successfully Added."

A new ADA Program Episode has been 'opened'.

To return to the DMH - CTRAC SUB-MENU:

- Press F9=HOME to return to the PROVIDER EPISODE MAINTENANCE.
- Press F9=HOME to return to the DMH - CTRAC SUB-MENU.

OR:

To return to the DMH – CTRAC MAIN MENU:

- Press F15=MAIN to return to the DMH - CTRAC MAIN MENU.

MAINTENANCE MENU - OPTION 98 FROM SUB-MENU

HOW TO: CHECK for DATA INTEGRITY ERRORS

DATA INTEGRITY PROGRAM

This is used to check for and correct errors on the client records.

PROCEDURES:

1. Page A-23 -- On the DMH - CTRAC MAIN MENU screen (Y092), key option 20 for DMH - CTRAC SUB-MENU and press <ENTER>.
2. Page A-24 -- On the DMH - CTRAC SUB-MENU (Y124):
 - Key the Client State Id or Chart Number.
 - Key Option 98 (Maintenance Menu) and press <ENTER>.
3. Page A-57 -- On the MAINTENANCE AND PROGRAMMING SUB-MENU (Y142), key Option 10 - Data Integrity Program and press <ENTER>.
4. Page A-58 -- In order to focus on your Provider's errors, if any, key your Provider Number in the space provided in the upper right hand corner of the screen (Y091) and press <ENTER>.
5. Note the errors on the record for the client at your Provider and F9=HOME to return to the DMH - CTRAC SUB-MENU to make updates.

OR

6. Page A-58 -- F3=RETURN to the MAINTENANCE AND PROGRAMMING SUB-MENU (Y142) to key the next client State Id or Chart Number and repeat Steps 3 and 4 to check for data integrity.
7. After all the client records have been checked, F9=HOME and return to the DMH - CTRAC SUB-MENU (Y124) to make updates.

- **NOTE:** The screen only displays up to 10 errors per screen, but can be paged forward to a second screen of 10 errors. (20 errors total). The total number of errors for a client are listed at the bottom left corner of the screen just above the Function key options.

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MAINTENANCE MENU - OPTION 98 FROM SUB-MENU (cont.)

HOW TO: BLANK OUT PROVIDER DISCONTINUATION DATE/TIME

This is used in the event a client was mistakenly discontinued or had an incorrect ending date/time.

PROCEDURES:

1. Page A-23 -- On the DMH - CTRAC MAIN MENU screen (Y092), key option 20 for DMH - CTRAC SUB-MENU and press <ENTER>.
2. Page A-24 -- On the DMH - CTRAC SUB-MENU (Y124):
 - Key the Client State Id or Chart Number.
 - Key Option 98 (Maintenance Menu) and press <ENTER>.
3. Page A-57 -- On the MAINTENANCE AND PROGRAMMING SUB-MENU screen (Y142), key Option 30 - Blank Out Provider Discontinuation Date/Time and press <ENTER>.
4. Page A-60 -- On the PROVIDER EPISODE LIST/SELECT (SPECIAL PROCESSING) screen (Y213), select the affected Provider Episode and press <ENTER>.

Note: Only the most recent Provider Episode Discontinuation Date & Time can be blanked out.

5. Page A-60 -- On the BLANK OUT DISCONTINUATION DATE & TIME MAINTENANCE screen (Y214):
 - Key 'U' on the Action Line.
 - Using the Space Bar on the keyboard, space out the Discontinuation Date and the Discontinuation Time and press <ENTER>.

This will automatically open all associated episodes with the same date/time as the old discontinuation date.

6. F9=HOME to return to the DMH - CTRAC SUB-MENU to continue with the client record.

WARNING: Please read the NOTE on the Blank out Discontinuation Date & Time Maintenance screen.

Reminders:

- The Space Bar **must be used** to blank out the data. Using a delete key does not delete the information off the data base.

HOW TO: ADD a STANDARD MEANS TEST SUMMARY

ADA DIVISION:

Since the Division of Alcohol and Drug Abuse requires the Insurance Code be keyed during the Admission Process on the ADA Additional Demographics Admissions, there are two options for ADA Providers to complete the insurance information required by the Standard Means Test.

FIRST OPTION: During the Admission Process...

1. Page A-13 -- Before leaving the ADA ADDITIONAL DEMOGRAPHICS ADMISSION screen (Y126), press F22=PRIVATE-INSURANCE.
2. Page A-35 -- On the PRIVATE INSURER LIST/SELECT screen (Y073), press F2=DETAIL.
3. Page A-35 -- On the PRIVATE INSURER MAINTENANCE screen (Y077):
 - Key 'A' (Add) on the Action Line.
 - Key the rest of the data and press <ENTER>.
4. When the Information Message "Successfully Added" appears:
 - F9=HOME to return to the ADA ADDITIONAL DEMOGRAPHICS ADMISSION Screen
 - Press <ENTER> to continue with the Admission Process.
5. When the Admission Process has been completed, press F13=SUB MEN.
6. Page A-24 -- On the DMH - CTRAC SUB-MENU screen (Y124), choose Option 75 and press <ENTER>.
7. Page A-53 -- On the STANDARD MEANS TEST SUMMARY LIST/SELECT screen (Y227), press F2=DETAIL.
8. Page A-53 -- On the non populated STANDARD MEANS TEST MAINTENANCE screen (Y228):
 - Key an 'A' (Add) on the Action Line.
 - Key the Standard Means data and press <ENTER>.
9. Page A-54 -- On the SMT PRIVATE INSURER LIST / SELECT screen (Y229) press F2=DETAIL if the insurance currently held by the client is not listed.
 - Key an 'A' (Add) on the Action Line
 - Key the data and press <ENTER>.
10. When Information Message "Successfully Added" is displayed, F9=HOME twice to return to the DMH - CTRAC SUB-MENU and continue with the next client or exit the system.

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HOW TO: ADD a STANDARD MEANS TEST SUMMARY (cont.)

SECOND OPTION: During the Maintenance Process...

1. Page A-13 -- Key the Insurance Code on the ADA ADDITIONAL DEMOGRAPHICS ADMISSION screen (Y126) and press <ENTER> as usual to continue with the Admission Process.
2. When the Admission Process has been completed, press F13=SUB MEN.
3. Page A-24 -- On the DMH - CTRAC SUB-MENU screen (Y124), choose Option 75 and press <ENTER>.
4. Page A-53 -- On the STANDARD MEANS TEST SUMMARY LIST/SELECT screen (Y227), press F2=DETAIL.
5. Page A-53 -- On the non populated STANDARD MEANS TEST MAINTENANCE screen (Y228):
 - Key an 'A' (Add) on the Action Line.
 - Key the Standard Means data and press <ENTER>.
6. Page A-54 -- On the SMT PRIVATE INSURER LIST / SELECT screen (Y229) press F2=DETAIL if the insurance currently held by the client is not listed.
 - Key an 'A' (Add) on the Action Line
 - Key the data and press <ENTER>.
7. When Information Message "Successfully Added" is displayed, F9=HOME twice to return to the DMH - CTRAC SUB-MENU and continue with the next client or exit the system.

CPS AND MRDD DIVISIONS:

1. Page A-23 -- On the DMH - CTRAC MAIN MENU screen (Y092), key option 20 for DMH - CTRAC SUB-MENU and press <ENTER>.
2. Page A-24 -- On the DMH - CTRAC SUB-MENU (Y124):
 - Key the Client State Id or Chart Number.
 - Key Option 75 (Standard Means Test Summary) and press <ENTER>.
3. Page A-53 -- On the STANDARD MEANS TEST SUMMARY LIST/SELECT screen (Y227), press F2=DETAIL.
4. Page A-53 -- On the non populated STANDARD MEANS TEST MAINTENANCE screen (Y228):
 - Key an 'A' (Add) on the Action Line.
 - Key the Standard Means data and press <ENTER>.
5. Page A-54 -- On the SMT PRIVATE INSURER LIST / SELECT screen (Y229) press F2=DETAIL if the insurance currently held by the client is not listed.
 - Key an 'A' (Add) on the Action Line
 - Key the data and press <ENTER>.
6. When Information Message "Successfully Added" is displayed, F9=HOME twice to return to the DMH - CTRAC SUB-MENU and continue with the next client or exit the system.

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HOW TO: ADD a STAFF MEMBER / STAFF PROVIDER EPISODE

ADDING A STAFF MEMBER:

1. On the DMH - CTRAC MAIN MENU, key '25' Option (Staff) and press <ENTER>.
2. Page A-61 -- On the STAFF MEMBER LIST/SELECT screen (Y149), search to see if the member to be added to your Provider is already on the system. If yes, select that staff member and use F2=DETAIL, continue with step 3. If no, use F2=DETAIL without doing the select procedure and proceed with step 3.
3. Page A-61 -- On the STAFF MEMBER MAINTENANCE screen (Y150):
 - Key an 'A' (Add) on the Action Line.
 - Proceed to key the data on the staff member and press <ENTER>. This step is necessary only once per staff member.
4. Staff member is now listed on CTRAC. If staff member is current and active, return to DMH - CTRAC MAIN MENU. If not, proceed to Step 5.

ACTIVATE A STAFF MEMBER:

5. Page A-61 -- On the STAFF MEMBER MAINTENANCE screen (Y150), press F10=STAFF-PROV-EPISODES.
6. Page A-62 -- On the STAFF PROVIDER EPISODE LIST/SELECT screen (Y151), press F2=DETAIL.
7. Page A-62 -- On the STAFF PROVIDER EPISODE MAINTENANCE screen (Y210):
 - Key 'A' (Add) on the action line.
 - Key the Begin Date and remaining information and press <ENTER>.
8. Staff member is now added to the Provider and is active. Return to the DMH – CTRAC MAIN MENU.

INACTIVATE A STAFF MEMBER:

1. On the DMH - CTRAC MAIN MENU, key '25' Option (Staff) and press <ENTER>.
2. Page A-61 -- On the STAFF MEMBER LIST/SELECT screen (Y149), use select procedure at top of screen to choose the staff member.
3. Page A-61 -- On the STAFF MEMBER MAINTENANCE screen (Y150), press F10=STAFF-PROV-EPISODES.
4. Page A-62 -- On the STAFF PROVIDER EPISODE LIST/SELECT screen (Y151), select the staff provider episode to be closed and press F2=DETAIL.
5. Page A-62 -- On the STAFF PROVIDER EPISODE MAINTENANCE screen (Y210):
 - Key 'U' (Update) on the Action Line.
 - Enter the End Date for the staff member and press <ENTER>.

Staff member is now inactive at your Provider. Return to the DMH – CTRAC MAIN MENU.

WARNING: You are encouraged to set a staff member to 'Inactive' rather than delete the staff member, unless the staff member was never hired by your Provider. It could affect accessing client records.

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HOW TO: WORK with DATE MAINTENANCE

CTRAC Levels of Episodes

1. **Chart Provider Episode** - admission date/time
discontinuation date/time
2. **Chart Admission/Commitment** - begin date
end date
2. **Client Treatment Team** - begin date
end date
2. **Diagnosis Episode** - diagnosis date/time
2. **Program Episode** - open date/time
close date/time
3. **Program Episode Status** - effective date/time
end date/time
3. **Program Ward Episode** - begin date/time
end date/time
3. **Program Mcaid-Mcare Episode** - effective date
end date

Hints for changing dates/times and work around for date/time overlap errors:

NOTE: There will be no automatic changing of other episode dates/times when a particular episode is changed. The user will be responsible for all other episode date/time changes to assure there is not a gap between episodes (if the chart provider episode admission date is changed from 5-1-95 to 4-1-95 and the admission/commitment record is not also changed to 4-1-95, it will not show complete commitment information from 4-1-95 to 5-1-95).

After corrections are made, the Data Integrity Program can be used to verify changes. See "Data Integrity" details on Page 39.

HOW TO: WORK with DATE MAINTENANCE (cont.)

Chart Provider Episode - Admission Date & Time

- Can be changed to an *earlier* date/time without overlap errors. However, this will cause a discrepancy between the Chart Provider Episode and all other episode records (level 2 - Commitment, Treatment Team, Diagnosis and Program Episodes as well as level 3 - Ward, Status and Mcaid-Mcare Episodes) unless you then go in and make beginning date/time changes on the other episodes which were added upon the admission process for that admission date/time.

Note: Commitment, Treatment Team, Ward, Status and Mcaid-Mcare Episodes will have to be deleted and re-added with the new dates/times as their begin dates/times are part of the key identifier on the data base and cannot be changed.

- Cannot be changed to a *later* date/time until the other episodes are first changed to the later date/time. Start with the lower levels of episodes (see level layout above). i.e. change all level 3 episodes that apply first (the order within a level does not matter), then proceed with level 2 episodes and finally the Admission date/time on Chart Provider Episode.

Chart Provider Episode - Discontinuation Date & Time

- Can be changed to a *later* date/time without overlap errors. However, this will cause a discrepancy between the Chart Provider Episode and all other episode records (level 2 - Commitment, Treatment Team, Program, Diagnosis and level 3 - Ward Episodes) unless you then make ending date/time changes on all other episodes for that admission/discontinuation.
- Cannot be changed to an *earlier* date/time until the other episodes are first changed to the earlier date/time. Start with the lower levels of episodes (see level layout above). i.e. change all level 3 episodes that apply first (the order within a level does not matter), then proceed with level 2 episodes and finally the Discontinuation date/time on Chart Provider Episode.
- Cannot be *blanked* out in the regular maintenance procedure (Y109). Go to option 20 from the DMH - CTRAC Main Menu, then option 98 from the DMH - CTRAC Sub- Menu, then option 30 from the Maintenance Menu. (see "Blank Out Discontinuation Date & Time" details on page 40)

HOW TO: WORK with DATE MAINTENANCE (cont.)

Program Episode - Open Date & Time

- Cannot be changed to an *earlier* date/time until the Chart Provider Episode admission date/time is first changed to the earlier date/time. After the open date/time is changed and there are level 3 - Ward, Status or Mcaid-Mcare Episodes, these episode date/times will also need to be changed to the earlier date/time when it applies.
- Cannot be changed to a *later* date/time until the level 3 - Ward, Status and Mcaid-Mcare Episodes, which apply, are deleted and re-added with the later date/time.

Program Episode - Close Date & Time

- Can be changed to a *later* date/time as long as the Chart Provider Episode discontinuation date/time is blank or, if not, then the close date/time must fall within the discontinuation date/time. Level 3 - Ward, Status and Mcaid-Mcare episode end dates/times which apply should also be changed.
- Cannot be changed to an *earlier* date/time until any Ward, Status and Mcaid-Mcare episodes which apply are changed to the earlier date/time first.
- Cannot be *blanked* out due to possible ADA closing information attached to the Program Episode. (see "Blank Out Discontinuation Date & Time" details on page 40)

Program Episode Status - Begin Date & Time

- Cannot be changed. Delete and re-add with correct date.

Program Episode Status - End Date & Time

- Can be changed to a *later* date/time as long as the Program Episode close date/time is blank, or, if not, then the end date/time must fall within the Program Episode close date/time.
- Can be changed to an *earlier* date/time.
- Can be *blanked* out as long as the Program Episode is 'open'.

Program Ward Episode - Begin Date & Time

- Cannot be changed. Delete and re-add with correct date.

Program Ward Episode - End Date & Time

- Can be changed to a *later* date/time as long as the Program Episode close date/time is blank, or, if not, then the end date/time must fall within the Program Episode close date/time.
- Can be changed to an *earlier* date/time.
- Can be *blanked* out as long as the Program Episode is 'open'.

HOW TO: WORK with DATE MAINTENANCE (cont.)

Admission Commitment Episode - Begin Date

- The begin date cannot be changed. You must first add a new Admission/Commitment then delete the old one.

Sometimes the old Commitment cannot be deleted, giving the error message "CH043-E:

Delete would leave a gap in the period of the Provider Episode". There is a work around for this problem. Change the Chart Provider Episode admission date to create a gap, then you can delete the Commitment. After removing the commitment, re-enter the correct admission date on the Chart Provider Episode.

Admission Commitment Episode - End Date

- Can be changed to an *earlier* or *later* date as long as it falls within the Chart Provider Episode date range.
- Can be *blanked* out.

Chart Case Manager - Begin Date

- Cannot be changed. Delete and re-add with correct date.

Chart Case Manager - End Date

- Can be changed to an earlier or later date.
- Can be *blanked* out.

Client Treatment Team - Begin Date

- Cannot be changed. Delete and re-add with correct date.

Client Treatment Team - End Date

- Can be changed to an earlier or later date as long as it falls within the Chart Provider Episode date range.
- Can be *blanked* out.

Diagnosis Episode - Diagnosis Date & Time

- Can be changed to an earlier or later date/time as long as it falls within the Chart Provider Episode date range.

HOW TO: WORK with DATE MAINTENANCE (cont.)

Program Mcaid-Mcare Indicator Episode - Effective Date

- Cannot be changed. Delete and re-add with correct date.

Program Mcaid-Mcare Indicator Episode - End Date

- Can be changed to an earlier or later date as long as it falls within the Program Episode date range.
- Can be *blanked* out.

Staff Provider Episode - Date Established

- Cannot be changed. Delete and re-add with correct date.

Staff Provider Episode - End Date

- Can be changed to an earlier or later date.
- Can be *blanked* out.

Screen

Y109 - Chart Provider Episode Maintenance

Admission-Date
Admission-Time
Discontinuation-Date
Discontinuation-Time

Y120 - Chart Admission-Commitment Maintenance

- * Begin-Date
End-Date

Y132 - Chart Case Manager Maintenance

- * Begin-Date
End-Date

Y114 - Client Treatment Team Maintenance

- * Begin-Date
End-Date

* Denotes dates/times which cannot be changed.

HOW TO: WORK with DATE MAINTENANCE (cont.)

Y112 - Chart Provider Comment

- * Comment-Date

Y183 - Program Episode Maintenance

Open-Date
Open-Time
Close-Date
Close-Time

Y185 - Program Episode Status Maintenance

- * Effective-Date
- * Effective-Time
- End-Date
- End-Time

Y187 - Program Ward Episode Maintenance

- * Begin-Date
- * Begin-Time
- End-Date
- End-Time

Y216 - Program Mcaid-Mcare Indicator Episode Maintenance

- * Effective-Date
- End-Date

Y148 - Diagnosis Episode Maintenance

Diagnosis-Date
Diagnosis-Time

Y210 - Staff Provider Episode Maintenance

- * Date-Established
- End-Date

* Denotes dates/times which cannot be changed.

DMH - CTRAC MAIN MENU

Y092

DMH - CTRAC Main Menu

MM-DD-YYYY

HH:MM:SS

Select the appropriate option : **10**

Enter Facility or Provider Number and press ENTER.

Facility : ____ Provider No. : _____

10 - Client Demographics/Search

15 - New Admissions/Readmissions/Waiting

20 - Sub Menu : Demographics

Chart Provider Episodes

Diagnosis

Ward Episodes

Standard Means Test

Charts

Commitments/Admissions

Program Episodes

Child Assessments

ISAP Assessments

25 - Staff

30 - Client Batch Match

40 - Active Clients

50 - Demographics Changes Report

70 - Code Tables

99 - DMH Menu

F1=HELP F5=DEFAULT-VALUES F15=DMH-MENU

REQUIRED ACTION: Key Option, <ENTER>

NOTE: This Option is to search for clients already in CTRAC.
To admit a client, the User must use Option 15.

DMH CLIENT SEARCH

Y093

DMH - CTRAC
DMH Client Search

MM-DD-YYYY
HH:MM:SS

Input All Known Client Information and press ENTER.

Chart Number : ____
State Id Number : ____

Social Security Number : ____
DCN (Medicaid Number) : ____

Client Last Name / Suf : _____ / ____
Client First Name : _____
Client Middle Name : _____

Sex : _ (M/F)
Race Code : _ +
Birth Date : ____
Age : ____ (+ or - 5 Years)

F1=HELP F3=RETURN F4=PROMPT F5=CLEAR

NOTE: Use legal name of client.

REQUIRED ATTRIBUTES:

Chart Number *
or
State Id Number
or
Client Last & First Name
or
Any other attributes to make the best possible search.

* Client must have been already admitted into CTRAC by your Provider for the Chart Number to work in the search.

CLIENT NAME LIST/SELECT

Y094

DMH - CTRAC
Client Name List/Select

MM-DD-YYYY
HH:MM:SS

Select (/) a Client and press (F2) DETAIL.

| Sel | Last Name | First Name | Sex | Race | Birthdate | SSN | State Id | ## |
|-----|-----------|------------|-----|------|------------|-------------|----------|----|
| _ | DIAMONDS | KING | M | 03 | 01 01 1951 | 232 32 3232 | 406235 | 28 |
| _ | DIAMONDS | JACK | M | 03 | 07 03 1973 | | 406245 | 15 |
| _ | DIAMONDS | QUEEN | F | 03 | 02 02 1952 | | 408457 | 15 |
| _ | DIAMONDS | TEN | M | 03 | 01 01 1971 | | 404023 | 15 |
| _ | DIAMONDS | EIGHT | M | 03 | 12 14 1965 | 999 55 5111 | 407316 | 12 |

Line 1 of 5

F1=HELP F2=DETAIL F3=RETURN F5=CLEAR F6=REFRESH F7=BWD F8=FWD F15=MENU

REQUIRED ACTION:

Following the directions at the top of the screen, select the Client.

If your Client is not on the list, F3=RETURN to go back to the Demographic Search Screen,
modify the search criteria and try again..

DMH - CTRAC MAIN MENU

Y092

DMH - CTRAC Main Menu

MM-DD-YYYY

HH:MM:SS

Select the appropriate option : **15**

Enter Facility or Provider Number and press ENTER.

Facility : ____ Provider No. : _____

10 - Client Demographics/Search

15 - New Admissions/Readmissions/Waiting

20 - Sub Menu : Demographics

Chart Provider Episodes

Diagnosis

Ward Episodes

Standard Means Test

Charts

Commitments/Admissions

Program Episodes

Child Assessments

ISAP Assessments

25 - Staff

30 - Client Batch Match

40 - Active Clients

50 - Demographics Changes Report

70 - Code Tables

99 - DMH Menu

F1=HELP F5=DEFAULT-VALUES F15=DMH-MENU

REQUIRED ACTION for an Admission: Key 15 on the option line, <ENTER>

DMH CLIENT ADMISSION SEARCH

Y093

DMH - CTRAC
DMH Client Admission Search

MM-DD-YYYY
HH:MM:SS

Input All Known Client Information and press ENTER.

Chart Number : ____
State Id Number : ____

Social Security Number : ____
DCN (Medicaid Number) : ____

Client Last Name / Suf _____ / ____
Client First Name : ____
Client Middle Name : ____

Sex : _ (M/F)
Race Code : _ +
Birth Date : ____
Age : ____ (+ or - 5 Years)

AA059-I: Enter Required Data

F1=HELP F3=RETURN F4=PROMPT F5=CLEAR

NOTE: Use legal name of client.

REQUIRED ATTRIBUTES:

Client Last Name
Client First Name
Client Middle Name*
Sex
Race Code
Birth Date (MM DD YYYY)

REQUIRED ACTION: Key required data, <ENTER>

* To prevent possible duplications of clients, the Client Middle Name or Initial is highly recommended.

CLIENT NAME LIST/SELECT

Y094

| DMH - CTRAC Client Name List/Select | | | | | | MM-DD-YYYY HH:MM:SS | |
|--|------------|-----|------|------------|-------------|------------------------|----|
| Select (/) a Client and press (F2) DETAIL. | | | | | | | |
| Sel Last Name | First Name | Sex | Race | Birthdate | SSN | State Id | ## |
| _ DIAMONDS | KING | M | 03 | 01 01 1951 | 232 32 3232 | 406235 | 28 |
| _ DIAMONDS | JACK | M | 03 | 07 03 1973 | | 406245 | 15 |
| _ DIAMONDS | QUEEN | F | 03 | 02 02 1952 | | 408457 | 15 |
| _ DIAMONDS | TEN | M | 03 | 01 01 1971 | | 404023 | 15 |
| _ DIAMONDS | EIGHT | M | 03 | 12 14 1965 | 999 55 5111 | 407316 | 12 |
| | | | | | | | |
| _ NEW ADMISSION | | | | | | Line 1 of 5 | |
| F1=HELP F2=DETAIL F3=RETURN F5=CLEAR F6=REFRESH F7=BWD F8=FWD F15=MENU | | | | | | | |

REQUIRED ACTION:

Following the directions at the top of the screen.
Select the client, if on the list, or New Admissions.

NOTE: The NEW ADMISSION option does not appear until the possible match score (##) has dropped below a score of 10 or if the numbers of possible matches do not exceed 11.

CLIENT ADMISSION

Y066

DMH - CTRAC
Client Admission

MM-MM-YYYY
HH:MM:SS

Input Client Information, select desired action and press ENTER.

Last Name/Suffix : DIAMONDS_____ / SR____ Chart Number :
First Name/Middle : NINE_____ / O_____ State Id :
Social Security No : 852 32 1478 Race Code : 03 + DCN (Medicaid) : _____
SSN Sent Ind : SSN Verify : + Sex (M/F) : M Birth Date : 07 06 1976

Prior Last Names: Hearing Status : _ +
Street : _____ Hispanic : _ +
: _____ Adoption Ind : N (Y/N)
City : _____ + Resid County : _ +
State : _ + Zip Code : _____ CPS Serv Area : _
Home Phone : _ _ _ _ Census Tract :
Work Phone : _ _ _ _ County Interst : _ +
Other Phone : _ _ _ _ Medicare Number : _____
Childrens Initiative : MORE +
AA059-I: Enter Required Data
F1=HELP F3=RETURN F4=PROMPT F6=REFRESH F15=MENU

NOTE: Use legal name of client.

REQUIRED ATTRIBUTES:

Hearing Status
City
Resid County
State

NON UPDATEABLE ATTRIBUTES:

Adoption Ind (once updated to 'Y')

NON KEYABLE ATTRIBUTES:

Chart Number
State Id
SSN Sent Ind
SSN Verify
Prior Last Name
Census Tract
Childrens Initiative

REQUIRED ACTION:

Key required attributes, <ENTER>
Note: If prompting on City and return with data, the Resid County, State, and Zip will automatically fill.

CTRAC Online User's Guide – Appendix A

CLIENT ADMISSION (ADDITIONAL)

Y067

DMH - CTRAC
Client Admission (Additional)

MM-DD-YYYY
HH:MM:SS

Input Client Information, select desired action and press ENTER.

Last Name/Suffix : DIAMONDS / SR Chart Number :
First Name/Middle : NINE / O State Id :
Social Security No : Race Code : 03 DCN (Medicaid) :
SSN Sent Ind : SSN Verify : Sex (M/F) : M Birth Date : 07 06 1976

Living Arrangement : _ + Veteran Status : _ (1=YES 2=NO 3=UNKN)
Marital Status : _ + Birthplace : _ +
Number of Children : _ Missouri County Birth : _ +
Occupation : _ + Dietary : _ +
Weekly Income : _ + Original Admit DMH :
Religion : _ + Deceased Date : MM DD YYYY
Education : _ + Deceased Indicator : _ (Y/N)
Special Education : _ +

MORE -

AA019-I: Successfully DISPLAYED

F1=HELP F3=RETURN F4=PROMPT F6=REFRESH F15=MENU

REQUIRED ATTRIBUTES:

None

NON UPDATEABLE ATTRIBUTES:

Last Name/Suffix
First Name/Middle
Race Code
Sex
DCN (Medicaid)
Birth Date

NON KEYABLE ATTRIBUTES:

SSN Sent Ind
SSN Verify
Chart Number
State Id

REQUIRED ACTION:

Key data on the optional attributes below
the starred line, if desired, <ENTER>

CLIENT PREFERRED LANGUAGE ADMISSION

Y232

DMH – CTRAC
Client Preferred Language Admission

MM-DD-YYYY
HH:MM:SS

Client Last Name / Suf : DIAMONDS / SR Chart Number :
Client First Name / MI : NINE / O State ID :

Enter Language information and press ENTER.

Preferred Language Group : __ +

Specific Language/Dialect (if known) :

F1=HELP F4=PROMPT F6=REFRESH F12=CANCEL

REQUIRED ATTRIBUTES:

Preferred Language Group Code

REQUIRED ACTION:

Key required data, <ENTER>

CLIENT CHART ADMISSION

Y115

| DMH - CTRAC Client Chart Admission | | MM-DD-YYYY HH:MM:SS |
|---|-------------------|---------------------------|
| Client Last Name/Suf : DIAMONDS | / SR | Chart Number : _____ |
| Client First Name/MI : NINE | / O | State Id : 402922 |
| | | Provider Number : 0000000 |
| Input Chart Information and press ENTER. | | |
| Division : _ + _ + _ + | Prin Prog Class : | Prin Diag Code : |
| Conditional Release Code : ____ (552=Forensic, 632=Civil, 700=Both) | | |
| Title XIX Food Ind : N (Y/N) | | |
| POS Contract Ind : N (Y/N) | | |
| POS Services Ind : N (Y/N) | | |
| Client Screening Result : _ (D/N) (D=DMH, N=Non-DMH) | | |
| MRDD Medicaid Waiver Ind : _ (Y/N) | | |
| F1=HELP F4=PROMPT F6=REFRESH F12=CANCEL F16=COMMENT F17=CASE MANAGER F19=CHILD-ASSESSMENT F20=CPS-OUTPAT-ADMIT F22=ADA SCREENING | | |

NOTE: The function keys, F16=COMMENT, F17=CASE MANAGER and F19=CHILD-ASSESSMENT can be used to key this data before <ENTER> and proceeding with the admission.

REQUIRED ATTRIBUTES:

Chart Number
Division

NON KEYABLE ATTRIBUTES:

State Id
Principal Program Class
Principal Diagnosis Code

REQUIRED ACTION: Key required data, <ENTER> **Note:** Press ENTER **if not** using one of the two options listed below.

1. Admission is a CPS Outpatient Admission (use **F20=CPS OUTPAT-ADMIT**) OR
2. Admission is an ADA Screening Admission (use **F22=ADA SCREENING**)

PROVIDER EPISODE ADMISSION

Y119

| DMH - CTRAC Provider Episode Admission | | MM-DD-YYYY HH:MM:SS |
|---|--|----------------------------|
| Client Last Name/Suf : DIAMONDS | / SR | Chart Number : 000 000000- |
| Client First Name/MI : NINE | / O | State Id : 402922 |
| | | Provider Number : 0000000 |
| Input Provider Episode Information and press ENTER. | | |
| Admission Date | : MM DD YYYY | |
| Admission Time | : 00 00 (HH MM) | |
| Admission Type Code | : F (R=ReAdmit, F=First Admit, T=Transfer) | |
| Referral Source Code | : _ + | |
| Non DMH Care Level | : _ (I=Inpatient, O=Outpatient, N=None) | |
| Non DMH Client Ind | : N (Y/N) | |
| Discontinuation Date | : MM DD YYYY | |
| Discontinuation Time | : 00 00 (HH MM) | |
| Discontinuation Status | : _ + | |
| Discontinuation Referral | : _ + | |
| Transfer Reason | : _____ | |
| F1=HELP F4=PROMPT F6=REFRESH F12=CANCEL | | |

REQUIRED ATTRIBUTES:

Admission Date/Time*
Admission Type Code**
Referral Source Code

NON UPDATEABLE ATTRIBUTES:

Non DMH Care Level
Non DMH Client Ind***

REQUIRED ACTION:

Key required data, <ENTER>.

* The time is on the military clock. 2:00 p.m. would be 14:00; 3:00 a.m. would be 03:00.

** This data is automatically populated by the system.

*** The Non DMH attributes are for those clients who are private pay, the state will not be invoiced for their services. This adds an additional level of security for the private clients. Once the indicator is changed to 'Y' and <ENTER>, it cannot be Updated. In order to reset the Non DMH Client Ind to 'N', the Provider Episode will have to be discontinued or deleted and the admission process rekeyed.

ADMISSION/COMMITMENT ADMISSION

Y125

| DMH - CTRAC | | MM-DD-YYYY |
|--------------------------------|-----------------|----------------------------|
| Admission/Commitment Admission | | HH:MM:SS |
| Client Last Name/Suf | : DIAMONDS / SR | Chart Number : 000 000000- |
| Client First Name/MI | : NINE / O | State Id : 402922 |
| Episode Admission Date | : MM DD YYYY | Provider Number : 0000000 |

Input Admission/Commitment Information, and press ENTER.

| | | |
|-----------------------------|--------------|--------------------------------|
| Type | : ____ + | |
| Begin Date | : MM DD YYYY | |
| End Date | : MM DD YYYY | |
| Division | : ____ + | |
| County | : ____ + | |
| Length of Commitment (Days) | : ____ | (000, 004, 021, 030, 090, 365) |
| Primary Commitment Ind | : Y | (Y/N) |

F1=HELP F4=PROMPT F6=REFRESH F12=CANCEL

REQUIRED ATTRIBUTES:

Type
Begin Date*
Division Code**
County
Primary Commitment Ind***

REQUIRED ACTION:

Key required data, <ENTER>.

* The Begin Date is automatically populated from the Provider Episode Admission Date.

** If there is only one Division listed on the Chart Episode, this attribute automatically populates. If there are more than one Division listed, the Division Code must be keyed.

*** The Primary Commitment is keyed if there is more than one Division or more than one Admission/Commitment per Provider Episode.

CTRAC Online User's Guide – Appendix A

ADA ADDITIONAL DEMOGRAPHICS ADMISSION – Division of Alcohol & Drug Abuse only

Y126

| DMH - CTRAC | | MM-DD-YYYY |
|--|---------------------|--------------------------------------|
| ADA Additional Demographics Admission | | HH:MM:SS |
| Client Last Name/Suf | : DIAMONDS / SR | Chart Number : 000 000000- |
| Client First Name/MI | : NINE / O | State Id : 402922 |
| Episode Admission Date | : MM DD YYYY | Provider Number : 0000000 |
| Input ADA Additional Demographics Information and Press ENTER. | | |
| Hispanic | : __ + | |
| Number of Children | : __ + | Veteran Status : __ (1=Yes, 2=No) |
| Race Code | : __ + | Referral Source Code : __ + |
| Monthly Income (\$) | : _____ (0000-9999) | Family Size (Pov Level) : __ (01-99) |
| Prior DETOX Code | : __ + | Number of Arrests : __ |
| Prior Resid. Code | : __ + | No. of DWI Arrests : __ |
| Prior Outpat. Code | : __ + | |
| Codependent Indicator | : __ (Y/N) | Primary Abuser State Id : _____ |
| Pregnant at Admission Code | : __ (1=Yes, 2=No) | TB Indicator : __ (Y/N) |
| Primary Source of Payment | : __ + | |
| Private Insurer Code | : __ + | |
| Arrests in Trmt (97=Unkown) | : __ | Self Help PGM Code : __ + |
| HIV Test Code | : __ + | |
| F1=HELP F4=PROMPT F6=REFRESH F12=CANCEL F22=PRIVATE-INSURANCE | | |

NOTE: This screen appear only when the client is on 'Client Chart' as Division 'A' and the Admission/Commitment is also in Division 'A.'

REQUIRED ATTRIBUTES:

| | |
|----------------------------|-----------------------------|
| Hispanic* | |
| Number of Children* | Veteran Status* |
| Race* | Referral Source* |
| Monthly Income | Family Size (Poverty Level) |
| Prior DETOX Episodes | Number of Arrests |
| Prior Residential Episodes | Number of DWI Arrests |
| Prior Outpatient Episodes | Codependent Indicator |
| Pregnant at Admission | TB Indicator |
| Primary Source of Payment | Private Insurer |

NON KEYABLE ATTRIBUTES:

| | | |
|------------------------|-------------------|----------|
| No. of Arrests in Trmt | Self Help Program | HIV Test |
|------------------------|-------------------|----------|

REQUIRED ACTION:

Key required data, <ENTER>

* If data is keyed on Y066 and Y067 Client Demographics screens, the attribute will automatically populate.

CTRAC Online User's Guide – Appendix A

ADA PUBLIC ASSISTANCE ADMISSION – Division of Alcohol & Drug Abuse only

Y225 Add

DMH – CTRAC
ADA Public Assistance Admission

MM-DD-YYYY
HH:MM:SS

Client Last Name / Suf : DIAMONDS / SR Chart Number : 000 000000-
Client First Name / MI : NINE / O State Id : 402922
Episode Admission Date : MM DD YYYY Provider Number : 0000000

Input Public Assistance codes and press ENTER

Code Description

— +
— +
— +
— +
— +
— +
— +
— +
— +

MORE +

F1=HELP F4=PROMPT F6=REFRESH F7=BWD F8=FWD F12=CANCEL

REQUIRED ATTRIBUTES:

At least one Public Assistance Code

REQUIRED ACTION:

Key required data, <ENTER>

PROVIDER EPISODE ADMISSION (continue with admission)

Y119

| DMH - CTRAC Provider Episode Admission | | MM-DD-YYYY HH:MM:SS |
|---|--|----------------------------|
| Client Last Name/Suf | : DIAMONDS / SR | Chart Number : 000 000000- |
| Client First Name/MI | : NINE / O | State Id : 402922 |
| | | Provider Number : 0000000 |
| Input Provider Episode Information and press ENTER. | | |
| Admission Date | : ____ | |
| Admission Time | : 00 00 (HH MM) | |
| Admission Type Code | : _ (R=ReAdmit, F=First Admit, T=Transfer) | |
| Referral Source Code | : _ + | |
| Non DMH Care Level | : _ (I=Inpatient, O=Outpatient, N=None) | |
| Non DMH Client Ind | : N (Y/N) | |
| Discontinuation Date | : MM DD YYYY | |
| Discontinuation Time | : 00 00 (HH MM) | |
| Discontinuation Status | : _ + | |
| Discontinuation Referral | : _ + | |
| Transfer Reason | : _____ | |
| CH032-I: Press ENTER to continue with admission | | |
| F1=HELP F4=PROMPT F6=REFRESH F12=CANCEL | | |
| F16=TEAM F17=DIAGNOSIS F18=ADA-DEMO F20= COMMITMENT F21=ADA-PUBLIC ASST | | |

NOTE: The F16=TEAM and/or F17=DIAGNOSIS key(s) can be used to enter this information before <ENTER> and proceeding with the admission.

NON UPDATEABLE ATTRIBUTES:

No attributes can be updated on this screen at this time.

NON KEYABLE ATTRIBUTES:

No attributes can be keyed at this time.

REQUIRED ACTION:

If not adding a Diagnosis Episode or Team Episode, <ENTER> to continue the Admission process.

PROGRAM EPISODE ADMISSION

Y211

| DMH - CTRAC | | | | MM-DD-YYYY |
|---------------------------|--------------|------|-----------------|---------------|
| Program Episode Admission | | | | HH:MM:SS |
| Client Last Name/Suf | : DIAMONDS | / SR | Chart Number | : 000 000000- |
| Client First Name/MI | : NINE | / O | State Id | : 402922 |
| Provider Adm. Date | : 04 01 1996 | | Provider Number | : 0000000 |

Input Program Episode Information and press ENTER.

| | | | |
|------------------|---|------------|---------|
| Division | : | __ | + |
| Treatment Pgm Cd | : | __ | + |
| Open Date | : | MM DD YYYY | |
| Open Time | : | 00 00 | (HH MM) |
| Location Number | : | __ | + |
| ADA Federal Id | : | _____ | |
| Placement Prov | : | _____ | |
| Program Class | : | | |
| Close Date | : | MM DD YYYY | |
| Close Time | : | 00 00 | (HH MM) |

F4=PROMPT F12=CANCEL

REQUIRED ATTRIBUTES:

Division *
Treatment Program Code
Open Date/Time **
Location Number ***
ADA Federal Id #
Placement Provider ##

NON KEYABLE ATTRIBUTES:

Program Class

REQUIRED ACTION:

Key the required data for your Division, <ENTER>.

* Division is populated from the Client Chart Admission unless there is more than one Division keyed

** Open Date/Time is populated from the Provider Episode Admission.

*** Required for Contract Providers.

When the Location Number is keyed, for ADA, the Federal Id is automatically entered.

Only when the Treatment Program Class is 'F' and the Provider is State Owned.

PROGRAM WARD EPISODE ADMISSIONS – For State Owned Providers only

Y212

| | DMH - CTRAC Program Ward Episode Admissions | MM-DD-YYYY HH:MM:SS |
|---|--|----------------------------|
| Client Last Name/Suf | : DIAMONDS / SR | Chart Number : 000 000000- |
| Client First Name/MI | : NINE / O | State Id : 402922 |
| Program Episode Date | : MM DD YYYY | Provider Number : 0000000 |
| Input Program Ward Episode Information and press ENTER. | | |
| Unit Program | : __ + | |
| Unit Pgm Subclass | : __ + | |
| Ward Code | : __ + | |
| Home Ward Indicator | : N (Y/N) | |
| Begin Date | : MM DD YYYY | |
| Begin Time | : 00 00 (HH MM) | |
| End Date | : MM DD YYYY | |
| End Time | : 00 00 (HH MM) | |
| F1=HELP F4=PROMPT F5=CLEAR F12=CANCEL | | |

REQUIRED ATTRIBUTES:

Unit Program
Unit Pgm Subclass
Ward Code
Home Ward Indicator *

NON UPDATEABLE ATTRIBUTES:

Begin Date
Begin Time

REQUIRED ACTION:

Key required attributes, <ENTER>.

* Needs to be 'Y' if this is where the client is sleeping.

CTRAC Online User's Guide – Appendix A

PROGRAM ADA STATISTICS ADMISSION – Division of Alcohol & Drug Abuse only

Y204

| DMH - CTRAC Program ADA Statistics Admission | | MM-DD-YYYY HH:MM:SS |
|---|-----------------|----------------------------|
| Client Last Name/Suf | : DIAMONDS / SR | Chart Number : 000 000000- |
| Client First Name/MI | : NINE / O | State Id : 402922 |
| Program Episode Date | : MM DD YYYY | Provider Number : 0000000 |

Input Program ADA Statistics Information and press ENTER.

| | |
|------------------------------|-----------------------|
| Activity Type | : O (O=Open, C=Close) |
| Employment Status | : _ + |
| Legal Status | : _ + |
| Income Source | : _ + |
| Addl Psychiatric Problem Ind | : _ (1=Yes, 2=No) |
| Education Program Indicator | : _ + |
| Program Success Indicator | : _ (Y=Yes, N=No) |
| Education Level | : _ + |
| Living Arrangement | : _ + |
| Marital Status | : _ + |
| Occupation | : _ + |
| Weekly Income | : _ + |

F1=HELP F4=PROMPT F5=CLEAR F6=REFRESH F12=CANCEL

REQUIRED ATTRIBUTES:

| | |
|------------------------------------|----------------------|
| Employment Status | Living Arrangement * |
| Legal Status | Marital Status * |
| Income Source | Occupation * |
| Education Level * | Weekly Income * |
| Additional Psychiatric Problem Ind | |

NON UPDATEABLE ATTRIBUTES:

Activity Type

NON KEYABLE ATTRIBUTES:

Education Program Indicator **
Program Success Indicator **

REQUIRED ACTION:

Key required data, <ENTER>

* If data was keyed on Client Admission or Client Admission (Additional) screens, this data will be automatically populated.

** These attributes are for Closing Activity Episodes

CTRAC Online User's Guide – Appendix A

PROGRAM ADA SUBSTANCE ABUSE ADMISSION - Division of Alcohol & Drug Abuse only

Y205

| DMH - CTRAC | | MM-DD-YYYY | |
|---------------------------------------|-----------------|-----------------|---------------|
| Program ADA Substance Abuse Admission | | HH:MM:SS | |
| Client Last Name/Suf | : DIAMONDS / SR | Chart Number | : 000 000000- |
| Client First Name/MI | : NINE / O | State Id | : 402922 |
| Program Episode Date | : MM DD YYYY | Provider Number | : 0000000 |

Input ADA Substance Abuse Information and press ENTER.

| --Open Activity-- | Primary | Secondary | Tertiary |
|-----------------------|----------|-----------|----------|
| Drug Used | : ____ + | ____ + | ____ + |
| Frequency Of Use | : ____ + | ____ + | ____ + |
| Administration Route | : _ + | _ + | _ + |
| Age Drug First Used | : ____ | ____ | ____ |
| Medication Prescribed | : ____ + | | |
| Methadone Use Plan | : _ | | |

Age Codes: 00=Newborn, 01-96=Actual Age, 99=None

Methadone Indicator Codes: 1=Yes, 2=No

AA019-I: Successfully DISPLAYED

F4=PROMPT F5=CLEAR F12=CANCEL

REQUIRED ATTRIBUTES:

Primary, Secondary, & Tertiary:

Drug Used

Frequency of Use

Administration Route

Age Drug First Used

Medication prescribed*

Methadone Use Plan

REQUIRED ACTION:

Key required data, <ENTER>.

* The medication is for treating the substance of abuse, i.e., Methadone or Laam. Not medication being used to treat a medical problem such as high blood pressure.

CTRAC Online User's Guide – Appendix A

CLIENT MAINTENANCE

```

Y066      __ Update (U)

DMH - CTRAC                                MM-MM-YYYY
Client Maintenance                          HH:MM:SS

Input Client Information, select desired action and press ENTER.

Last Name/Suffix : DIAMONDS_____ / SR_      Chart Number :
First Name/Middle : NINE_____ / O_____      State Id :
Social Security No : __ __ __ Race Code : 06 +    DCN (Medicaid) : _____
SSN Sent Ind :          SSN Verify : + Sex (M/F) : __ Birth Date : 03 13 1947
*****

Prior Last Names:                            Hearing Status : _ +
Street : _____                          Hispanic : _ +
: _____                                Adoption Ind : N (Y/N)
City : _____ +                          Resid County : __ +
State : __ + Zip Code : _____          CPS Serv Area : __
Home Phone : __ __ __                      Census Tract :
Work Phone : __ __ __                      County Interst : __ +
Other Phone : __ __ __                     Medicare Number : _____
Childrens Initiative : NO                                MORE +
CL004-I: Admission Completed Successfully.
F3=RET F4=PRMPT F6=RFSH F7=BWD F8=FWD F11=TITL4A F13=SUB-MEN F14=CHART F15=MENU
F16=NAME F17=INT-PRTY F18=SSN F19=LIV-ARR F20=IMPAIR F21=COURT F22=INS F23=ADDR

```

REQUIRED ACTION:

Use F15=MENU to return to the CTRAC Main Menu to exit the system or Admit the next Client.

Use F13=SUB-MEN to add the Standard Means Test Summary or a Diagnosis Episode.

The function keys at the bottom of the screen can also be used to add any appropriate episode.

CTRAC Online User's Guide – Appendix A

CPS OUTPATIENT ADMISSION (FROM Y115 - CLIENT CHART ADMISSION)

Y220

| | |
|--------------------------|------------|
| DMH - CTRAC | 11-13-2000 |
| CPS OUTPATIENT ADMISSION | 12:19:48 |

| | | | |
|-----------------------------|------|-----------------|---------------|
| Client Last Name/Suf : DOE | / JR | Chart Number | : 001 9003434 |
| Client First Name/MI : JOHN | / H | State Id | : 402362 |
| | | Provider Number | : 001-665 |

Input Required Information and press ENTER.

| | | | |
|-----------------------------------|--------------|--------------------|-----------------|
| Admission Date | : MM DD YYYY | Admission Time | : 00 00 (HH MM) |
| Admission Type Code | : R (R/F/T) | Non DMH Client Ind | : N (Y/N) |
| Referral Source Code | : ____ + | | |
| Commitment Type | : ____ + | | |
| Commitment County | : ____ + | | |
| Treatment Pgm Code | : ____ + | | |
| Location Number | : ____ + | | |
| Required for State Facility only: | | | |
| Unit Program | : ____ + | | |
| Unit Pgm Subclass | : ____ + | | |
| Ward Code | : ____ + | | |

F1=HELP F4=PROMPT F6=REFRESH F12=CANCEL

CTRAC Online User's Guide – Appendix A

ADA SCREENING

(FROM Y115 - CLIENT CHART ADMISSION)

Y240

| | |
|---------------|------------|
| DMH - CTRAC | 11-13-2000 |
| ADA SCREENING | 12:12:01 |

| | | | |
|-----------------------------|------|-----------------|---------------|
| Client Last Name/Suf : DOE | / JR | Chart Number | : 001 9003434 |
| Client First Name/MI : JOHN | / H | State Id | : 402362 |
| | | Provider Number | : 001-665 |

Input Required Information and press ENTER.

| | | | |
|-----------------------------------|--------------|------------------------|-----------------|
| Admission Date | : MM DD YYYY | Admission Time | : 00 00 (HH MM) |
| Admission Type Code | : R (R/F/T) | Non DMH Client Ind | : N (Y/N) |
| Referral Source Code | : ____ + | | |
| Commitment Type | : 130 | NON-ADMISSION (SCR/WT) | |
| Commitment County | : ____ + | | |
| Treatment Pgm Code | : 101 | Registration | |
| Location Number | : ____ + | | |
| Required for State Facility only: | | | |
| Unit Program | : ____ + | | |
| Unit Pgm Subclass | : _ + | | |
| Ward Code | : ____ + | | |

F1=HELP F4=PROMPT F6=REFRESH F12=CANCEL

DMH - CTRAC MAIN MENU

Y092

DMH - CTRAC Main Menu

MM-DD-YYYY
HH:MM:SS

Select the appropriate option : **20**
Enter Facility or Provider Number and press ENTER.

Facility : 001 Provider No. : 001-665

- 10 - Client Demographics/Search
- 15 - New Admissions/Readmissions/Waiting
- 20 - Sub Menu : Demographics**
 - Chart Provider Episodes**
 - Diagnosis**
 - Ward Episodes**
 - Standard Means Test**
- 25 - Staff
- 30 - Client Batch Match
- 40 - Active Clients
- 50 - Demographics Changes Report
- 70 - Code Tables
- 99 - DMH Menu

Charts
Commitments/Admissions
Program Episodes
Child Assessments
ISAP Assessments

F1=HELP F5=DEFAULT-VALUES F15=DMH-MENU

REQUIRED ACTION:

Key 20 on the option line, <ENTER>

CTRAC Online User's Guide – Appendix A

DMH - CTRAC SUB-MENU

Y124

| DMH - CTRAC Sub-Menu | | MM-DD-YYYY HH:MM:SS | |
|--|--------------------------------------|------------------------|-----------|
| Enter a State Id or Chart Number, Select an Option, and press ENTER. | | | |
| State Id | : _____ | Client Last Name/Suf | : / |
| Chart Number | : 001 9003434 | Client First Name/MI | : / |
| All Providers | : N (Y/N) | Provider Number | : 001-665 |
| | | | |
| — | 10 Demographics | | |
| | 20 Chart | | |
| | 30 Provider Episode | | |
| | 40 Admission/Commitments | | |
| | 50 Diagnosis | | |
| | 60 Program Episode | | |
| | 65 Program Ward Episode | | |
| | 70 Chart Child Assessment | | |
| | 75 Standard Means Test Summary | | |
| | 80 ISAP Assessment List | | |
| | 90 MEIS System | | |
| | 98 Maintenance Menu : Data Integrity | | |
| | 99 CTRAC Main Menu | | |

CH025-I: Enter Client State Id, or Local Chart Number.

F1=HELP F5=CLEAR F15=MENU F16=DEMO F17=CHART F18=PROV-EPIS F19=PGM-EPIS

NON KEYABLE ATTRIBUTES:

All Providers *
Client Last Name/Suf
Client First Name/MI
Provider Number

REQUIRED ACTION:

Key State Id or Chart Number of Client.
Key Option, <ENTER>.

REQUIRED ACTION:

Key State Id or Chart Number of Client.
Key Option, <ENTER>.

* Can only be changed if you have Cross Provider Access.

CTRAC Online User's Guide – Appendix A

CLIENT DEMOGRAPHICS MAINTENANCE

(FROM Y124 – SUB MENU -- OPTION 10 – DEMOGRAPHICS)

```
Y066      _      Update (U)

DMH - CTRAC                                10-24-2000
Client Maintenance                          13:16:25

Input Client Information, select desired action and press ENTER.

Last Name/Suffix : DOE_____ / JR_      Chart Number : 001 9003434
First Name/Middle : JOHN_____ / H_____ State Id       : 402362
Social Security No : 343 33 4441   Race Code : 01 + DCN (Medicaid) : 38383324
SSN Sent Ind :      SSN Verify : R + Sex (M/F) : M   Birth Date      : 08 22 1940
*****
Prior Last Names: DOER              DOE          Hearing Status : 1   +
Street      : 121 SOUTH STREET_____ Hispanic           : 01 +
              : _____ Adoption Ind       : N   (Y/N)
City        : JEFFERSON CITY__ +      Resid County      : 051 +
State       : MO + Zip Code : 65251_____ CPS Serv Area    : 11
Home Phone  : 314 244 2344           Census Tract      :
Work Phone  : 816 380 4731           County Interst    : 007 +
Other Phone : _____ Medicare Number : _____
Childrens Initiative : No                                MORE   +
AA019-I: Successfully DISPLAYED
F3=RET F4=PRMPT F6=RFSH F7=BWD F8=FWD F11=TITL4A F13=SUB-MEN F14=CHART F15=MENU
F16=NAME F17=INT-PRTY F18=SSN F19=LIV-ARR F20=IMPAIR F21=COURT F22=INS F23=ADDR
```

(F8 FROM Y066 - ABOVE SCREEN)

```
Y067      _      Update (U)

DMH - CTRAC                                10-24-2000
Client Maintenance (Additional)              13:22:14

Input Client Information, select desired action and press ENTER.

Last Name/Suffix : DOE_____ / JR_      Chart Number : 001 9003434
First Name/Middle : JOHN_____ / H_____ State Id       : 402362
Social Security No : 343 33 4441   Race Code : 01   DCN (Medicaid) : 38383324
SSN Sent Ind :      SSN Verify : R   Sex (M/F) : M   Birth Date      : 08 22 1940
*****
Living Arrangement : 11 +   Veteran Status           : 2 (1=YES 2=NO 3=UNKN)
Marital Status     : 1 +   Birthplace                : AK +
Number of Children : 02   Missouri County Birth      : 051 +
Occupation         : 05 +   Dietary                  : 010 +
Weekly Income      : 05 +   Original Admit DMH        : 01 15 1995
Religion           : 10 +   Deceased Date             : 08 01 2000
Education          : 12 +   Deceased Indicator         : Y   (Y/N)
Special Education  : 20 +   Preferred Language        : 01   (F10)
                                                                MORE   -
AA019-I: Successfully DISPLAYED
F3=RET F4=PRMPT F6=RFSH F7=BWD F8=FWD F11=TITL4A F13=SUB-MEN F14=CHART F15=MENU
F16=NAME F17=INT-PRTY F18=SSN F19=LIV-ARR F20=IMPAIR F21=COURT F22=INS F23=ADDR
```

CTRAC Online User's Guide – Appendix A

CLIENT TITLE 4A AUTHORIZATION LIST/SELECT

(FROM Y124 – SUB MENU -- OPTION 10 – DEMOGRAPHICS -- F11)

Y194

DMH - CTRAC 11-09-2000
Client Title 4A Authorization List/Select 09:01:39

Client Last Name/Suf : DOE / JR Chart Number : 001 9003434
Client First Name/MI : JOHN / H State Id : 402362

Select (/) a Client Title 4A Authorization and press (F2) DETAIL.

| Sel | Begin Date | End Date | Creation Date | Creation Provider | Prov Number |
|-----|------------|------------|---------------|----------------------|-------------|
| _ | 10 01 1994 | 10 01 1995 | 12 22 1994 | POPLAR BLUFF REGIONA | 018-771 |
| _ | 10 01 1993 | 10 01 1994 | 12 22 1994 | DMH Central Office | 008-650 |
| _ | 10 01 1992 | 10 01 1993 | 12 22 1994 | POPLAR BLUFF REGIONA | 018-771 |

MORE

F1=HELP F2=DETAIL F3=RETURN F6=REFRESH F7=BWD F8=FWD F9=DEMO

CLIENT TITLE4A AUTHORIZATION MAINTENANCE

(F2 DETAIL FROM ABOVE SCREEN)

Y195

_ Add (A) Delete (D)

DMH - CTRAC 11-09-2000
Client Title 4A Authorization Maintenance 09:06:03

Client Last Name/Suf : DOE / JR Chart Number : 001 9003434
Client First Name/MI : JOHN / H State ID : 402362

Input Title 4A information, select desired action and press ENTER.

Authorization Begin Date : 11 01 2000

Authorization End Date : 11 01 2001 End Date is automatically calculated
as 1 year from Begin Date.

Creation Date : 11 09 2000
Creation Provider : 001-665 FULTON STATE HOSPITAL
Creation User ID : MZROWLC

AA017-I: Successfully ADDED

F1=HELP F3=RETURN F5=CLEAR F9=DEMOGRAPHICS

CTRAC Online User's Guide – Appendix A

CLIENT PRIOR NAME LIST/SELECT

(FROM Y124 – SUB MENU -- OPTION 10 – DEMOGRAPHICS -- F16)

Y068

```
DMH - CTRAC                                11-09-2000
Client Prior Name List/Select              09:10:24

Client Last Name / Suf : DOE                / JR    Chart Number : 001 9003434
Client First Name / MI : JOHN              / H      State Id   : 402362
```

Select (/) a client Prior Name and press (F2) DETAIL.

```
Sel  Last Name      First Name      Creation Date
_    DOER           JOHNNY         10 03 2000
```

MORE

F1=HELP F2=DETAIL F3=RETURN F6=REFRESH F7=BWD F8=FWD F9=DEMO

CLIENT PRIOR NAME MAINTENANCE

(F2 DETAIL FROM ABOVE SCREEN)

Y076

_ Add (A) Delete (D)

```
DMH - CTRAC                                11-09-2000
Client Prior Name Maintenance              09:12:31

Client Last Name/Suf : DOE                / JR    Chart Number : 001 9003434
Client First Name/MI : JOHN              / H      State Id   : 402362
```

Input the client prior name information,
select desired action and press ENTER.

```
Last Name / Suffix   : DOHN_____ / ____
First Name           : JOHN_____
Middle Name          : H_____
Adoption Indicator   : N (Y/N)
Birth Name Indicator : _ (Y/space)
Creation Date        : 11 09 2000
Creation Provider     : 001-665
```

AA017-I: Successfully ADDED

F1=HELP F3=RETURN F5=CLEAR F9=DEMOGRAPHICS

CTRAC Online User's Guide – Appendix A

INTERESTED PARTY LIST/SELECT

(FROM Y124 – SUB MENU -- OPTION 10 – DEMOGRAPHICS -- F17)

Y074

```
DMH - CTRAC                                11-09-2000
Interested Party List/Select                09:16:38

Client Last Name/Suf : DOE                  / JR      Chart Number : 001 9003434
Client First Name/MI : JOHN                 / H        State Id      : 402362

Select (/) an Interested Party and press (F2) DETAIL.

Sel Last Name      Suf  First Name      MI Type  Relationship/Description
_  ZARUMBA                GEO              J   B      18 BIRTH PARENT NON-GUARDIAN

F1=HELP  F2=DETAIL  F3=RETURN  F6=REFRESH  F9=HOME
```

INTERESTED PARTY MAINTENANCE

(F2 DETAIL FROM ABOVE SCREEN)

Y075

```
_  Add (A)  Delete (D)  Update (U)

DMH - CTRAC                                11-09-2000
Interested Party Maintenance                09:19:18

Client Last Name/Suf : DOE                  / JR      Chart Number : 001 9003434
Client First Name/MI : JOHN                 / H        State Id      : 402362

Input Interested Party Information, select desired Action and press ENTER.

Last Name/Suffix      : DOE_____ / ____
First Name/Mid Name   : CATHY_____ / _____
Street Address        : 121 SOUTH STREET_____
City                  : JEFFERSON CITY____ County : 051 + COLE
State : MO + Zip Code : 65102_____ Social Security No. : 342 77 8933

Interested Party Type : C   + CO-GUARDIAN
Relationship          : 21 + SPOUSE IS NON-GUARDIAN
Provider Number       : 001-665
Guardianship County   : ____ +

Phone Numbers
Home : ____
Work : ____
Other : ____

AA017-I: Successfully ADDED
F1=HELP  F3=RETURN  F4=PROMPT  F5=CLEAR  F9=HOME  F12=CANCEL
```

CTRAC Online User's Guide – Appendix A

CLIENT SSN VERIFICATION LIST

(FROM Y124 – SUB MENU -- OPTION 10 – DEMOGRAPHICS -- F18)

Y100

DMH - CTRAC 11-09-2000
Client SSN Verification List 09:29:39

Client Last Name/Suf : DOE / JR Chart Number : 001 9003434
Client First Name/MI : JOHN / H State Id : 402362

Scroll through the List and Press (F3) RETURN

| Last Name | First Name | Middle Name | Birthdate | Sex | SSN | Verify |
|-----------|------------|-------------|------------|-----|-------------|--------|
| DOE | JOHN | ALBERT | 08 22 1940 | M | 343 33 4441 | V |

MORE

F1=HELP F3=RETURN F7=BWD F8=FWD F18=VERIFICATION-CODES

CTRAC Online User's Guide – Appendix A

CLIENT PREVIOUS LIVING ARRANGEMENT LIST/SELECT

(FROM Y124 – SUB MENU -- OPTION 10 – DEMOGRAPHICS -- F19)

Y071

DMH - CTRAC 11-09-2000
Client Previous Living Arrangement List/Select 09:33:27

Client Last Name/Suf : DOE / JR Chart Number : 001 9003434
Client First Name/MI : JOHN / H State Id : 402362

Select (/) a Living Arrangement Code to Delete and press (F2) DETAIL.

| Sel | Code | Description | Date Entered |
|-----|------|-----------------------------|--------------|
| _ | 12 | (18+) With Unrelated Person | 10 03 2000 |
| _ | 11 | (18+) With Family | 06 09 2000 |

MORE +

F1=HELP F2=DETAIL F3=RETURN F6=REFRESH F7=BWD F8=FWD F9=DEMO

CLIENT PREVIOUS LIVING ARRANGEMENT MAINTENANCE

(F2 DETAIL FROM ABOVE SCREEN)

Y079

_ Delete (D)

DMH - CTRAC 11-09-2000
Client Previous Living Arrangement Maintenance 09:34:53

Client Last Name/Suf : DOE / JR Chart Number : 001 9003434
Client First Name/MI : JOHN / H State Id : 402362

Select delete action if desired and press ENTER.

Living Arrangement Code : 12

Description : (18+) With Unrelated Person

Date Entered : 10 03 2000

Creation Provider :

AA019-I: Successfully DISPLAYED
F1=HELP F3=RETURN F5=CLEAR F9=DEMOGRAPHICS

CTRAC Online User's Guide – Appendix A

CLIENT IMPAIRMENT LIST/SELECT

(FROM Y124 – SUB MENU -- OPTION 10 – DEMOGRAPHICS -- F20)

Y072

```
DMH - CTRAC                                11-09-2000
Client Impairment List/Select              09:36:33

Client Last Name/Suf : DOE                  / JR      Chart Number : 001 9003434
Client First Name/MI : JOHN                 / H        State Id   : 402362

Select (/) a Client Impairment and press (F2) DETAIL.

Sel Code  Description                      Date Entered
_   13    Partially Sighted                09 11 2000
_   15    Emotionally Disturbed            03 24 2000

MORE

F1=HELP  F2=DETAIL  F3=RETURN  F6=REFRESH  F7=BWD  F8=FWD  F9=DEMOGRAPHICS
```

CLIENT IMPAIRMENT MAINTENANCE

(F2 DETAIL FROM ABOVE SCREEN)

Y078

```
_      Add (A)      Delete (D)

DMH - CTRAC                                11-09-2000
Client Impairment Maintenance              09:38:35

Client Last Name/Suf : DOE                  / JR      Chart Number : 001 9003434
Client First Name/MI : JOHN                 / H        State Id   : 402362

Input Client Impairment information, select desired action and press ENTER.

Code           : 13  +
Description     : Partially Sighted
Date Entered   : 09 11 2000
Time Entered   : 08:21:11
Creation Provider : 008-650

AA019-I: Successfully DISPLAYED
F1=HELP  F3=RETURN  F4=PROMPT  F5=CLEAR  F9=DEMOGRAPHICS
```

CTRAC Online User's Guide – Appendix A

FORENSIC COURT ORDER COMMITMENT LIST/SELECT

(FROM Y124 – SUB MENU -- OPTION 10 – DEMOGRAPHICS -- F21)

Y096

```
DMH - CTRAC                                11-09-2000
Forensic Court Order Commitment List/Select  09:40:49

Client Last Name/Suf : DOE                  / JR      Chart Number : 001 9003434
Client First Name/MI : JOHN                 / H      State Id   : 402362

Select (/) a Forensic Commitment and press (F2) DETAIL.

Sel Commitment  Court Order  Court Case  End Date  Conditional  Creation
      Type      Date      Number      Release Ind  Provider
_      400      12 01 1994
                                           008-650

MORE

F1=HELP  F2=DETAIL  F3=RETURN  F6=REFRESH  F7=BWD  F8=FWD  F9=DEMO
```

FORENSIC COURT ORDER COMMITMENT MAINTENANCE

(F2 DETAIL FROM ABOVE SCREEN)

Y097

```
_      Add (A)  Delete (D)  Update (U)

DMH - CTRAC                                11-09-2000
Forensic Court Order Commitment Maintenance  09:42:02

Client Last Name/Suf : DOE                  / JR      Chart Number : 001 9003434
Client First Name/MI : JOHN                 / H      State Id   : 402362

Input Forensic Commitment Info, select desired action and press ENTER.

Commitment Type      : 400 +      Offense Charge 1      : 101 +
Court Order Date      : 12 01 1994  Offense Charge 2      : ____ +
Court Case Number     : _____ Offense Charge 3      : ____ +
Commitment End Date   : MM DD YYYY  Offense Charge 4      : ____ +
First Contact Date    : MM DD YYYY  Offense Charge 5      : ____ +
Report Court Date     : MM DD YYYY  Case Monitor SSN      : ____ _ ____ +
Refer Court County    : 051 +      Residence Released Type : ____ +
Service Provider Type : ____ +      Court Cond Release Date : MM DD YYYY
Medicatr Release Ind  : _          Cond Release Revoke Date : MM DD YYYY
Trial Release Ind     : _          Uncondl Release Date   : MM DD YYYY
Cond Release Ind      : _          Creation Provider      : 008-650

AA019-I: Successfully DISPLAYED
F1=HELP  F3=RETURN  F4=PROMPT  F5=CLEAR  F9=DEMO  F17=COMP-EXAM  F18=FOREN-EXAM
```

CTRAC Online User's Guide – Appendix A

FORENSIC COMPETENCY EXAM RESULTS LIST/SELECT

(FROM Y124 – SUB MENU -- OPTION 10 – DEMOGRAPHICS -- F21 – COURT ORDER -- F17)

Y098

DMH - CTRAC 11-09-2000
Forensic Competency Exam Results List/Select 09:43:40

Client Last Name/Suf : DOE / JR Chart Number : 001 9003434
Client First Name/MI : JOHN / H State Id : 402362

Select (/) a Competency Exam and press (F2) DETAIL.

| Sel | Exam Date | Exam Results | Creation Provider | Examiner SSN |
|-----|------------|--------------|-------------------|--------------|
| _ | 12 05 1994 | C | 008-650 | 466 55 1234 |

MORE

F1=HELP F2=DETAIL F3=RETURN F6=REFRESH F7=BWD F8=FWD F9=COURT

FORENSIC COMPETENCY EXAM RESULTS MAINTENANCE

(F2 DETAIL FROM ABOVE SCREEN)

Y099

_ Add (A) Delete (D) Update (U)

DMH - CTRAC 11-09-2000
Forensic Competency Exam Results Maintenance 09:45:45

Client Last Name/Suf : DOE / JR Chart Number : 001 9003434
Client First Name/MI : JOHN / H State Id : 402362

Input Competency Exam Results Info, select desired Action and press ENTER.

Exam Date : 12 05 1994

Exam Results : C (C=Comp, I=Incomp, N=Never-Comp)

Examiner SSN : 466 55 1234 +

Creation Provider : 008-650

Creation Date : 02 20 1995

AA019-I: Successfully DISPLAYED

F1=HELP F3=RETURN F4=PROMPT F5=CLEAR F9=COURT

CTRAC Online User's Guide – Appendix A

FORENSIC EXAM RESULTS LIST/SELECT

(FROM Y124 – SUB MENU -- OPTION 10 – DEMOGRAPHICS -- F21 – COURT ORDER -- F18)

Y101

```
DMH - CTRAC                                11-09-2000
Forensic Exam Results List/Select           09:47:07

Client Last Name/Suf : DOE                  / JR      Chart Number : 001 9003434
Client First Name/MI : JOHN                 / H      State Id : 402362

Select (/) a Forensic Exam and press (F2)  DETAIL.

Sel  Examination  Creation  Examiner  Examiner  REJIS  Evaluation
     Date         Provider  SSN 1     SSN 2     Identfcatn Site Code
_    12 05 1994   008-650
                                           MORE

F1=HELP  F2=DETAIL  F3=RETURN  F6=REFRESH  F7=BWD  F8=FWD  F9=COURT
```

FORENSIC EXAM RESULTS MAINTENANCE

(F2 DETAIL FROM ABOVE SCREEN)

Y102

_ Add (A) Delete (D)

```
DMH - CTRAC                                11-09-2000
Client Forensic Exam Results Maintenance    09:50:00

Client Last Name/Suf : DOE                  / JR      Chart Number : 001 9003434
Client First Name/MI : JOHN                 / H      State Id : 402362

Input Forensic Exam Results Information, select desired Action and press ENTER.

Examination Date      : 12 05 1994          Mental Disease          : 1 +
REJIS Identification  : _____          Mental Defect           : _ +
Examiner SSN 1        : ____ _ +            Competent to Stand Trial : _ +
Examiner SSN 2        : ____ _ +            Responsible at Time of Offense : _ +
Evaluation Site       : _ (I=INPAT,          Diminish Capacity      : _ +
                        O=OUTPAT,            Institutionalized Pending Trial : _ +
                        C=CORR)              Competent to be Sentenced : _ +
Creation Date         : 02 20 1995          Other Incompetencies    : _ +
Creation Provider     : 008-650

AA019-I: Successfully DISPLAYED
F1=HELP  F3=RETURN  F4=PROMPT  F5=CLEAR  F9=COURT
```

CTRAC Online User's Guide – Appendix A

PRIVATE INSURER LIST/SELECT

(FROM Y124 – SUB MENU -- OPTION 10 – DEMOGRAPHICS -- F22)

Y073

```
DMH - CTRAC                                11-09-2000
Private Insurer List/Select                09:53:05

Client Last Name/Suf : DOE                  / JR      Chart Number : 001 9003434
Client First Name/MI : JOHN                 / H        State Id   : 402362

Select (/) a Private Insurer and press (F2) DETAIL.

Sel Code Private Insurer Name      Begin Date      End Date      Provider
010  AWMA GROUP HLTH & LIFE IN      08-25-2000
000  NO HEALTH INSURANCE            06-01-2000      06-08-2000    WESTERN MO MHC
010  AWMA GROUP HLTH & LIFE IN      03-01-2000      FULTON STATE HS
120  CENTR STS SE/SW HLTH/WELF      10-01-1999      POP. BLUFF REG
000  NO HEALTH INSURANCE            09-01-1999      09-30-1999    POP. BLUFF REG
000  NO HEALTH INSURANCE            08-01-1999      05-01-1999    FULTON STATE HS

MORE +

F1=HELP  F2=DETAIL  F3=RETURN  F6=REFRESH  F7=BWD  F8=FWD  F9=HOME  F12=CANCEL
```

PRIVATE INSURER MAINTENANCE

(F2 DETAIL FROM ABOVE SCREEN)

Y077

_ Add (A) Delete (D) Update (U)

```
DMH - CTRAC                                11-09-2000
Private Insurer Maintenance                09:55:05

Client Last Name/Suf : DOE                  / JR      Chart Number : 001 9003434
Client First Name/MI : JOHN                 / H        State Id   : 402362

Input Private Insurer Information, select desired Action and press ENTER.

Private Insurer Code      : 010 +  AWMA GROUP HLTH & LIFE IN
Private Insurance Number   : _____
Private Insurance Group Number : _____
Begin Date                 : 03 01 2000
End Date                   : MM DD YYYY

Are Benefits exhausted for ADA : _      (Y=Yes space=No)
CPS : _
MRDD : _

Provider                   : 001-665 FULTON STATE HOSPITAL

AA019-I: Successfully DISPLAYED
F1=HELP  F3=RETURN  F4=PROMPT  F5=CLEAR  F6=REFRESH  F9=HOME  F12=CANCEL
```

CTRAC Online User's Guide – Appendix A

CLIENT ADDRESS LIST/SELECT

(FROM Y124 – SUB MENU -- OPTION 10 – DEMOGRAPHICS -- F23)

Y069

```
DMH - CTRAC                                11-09-2000
Client Address List/Select                  09:57:52

Client Last Name/Suf : DOE                  / JR      Chart Number : 001 9003434
Client First Name/MI : JOHN                 / H      State Id      : 402362
Current Address : 121 SOUTH STREET          JEFFERSON CITY MO
Provider : 008-650 User Id : MZROWLC

Select (/) a Client Previous Address and press (F2) DETAIL.

Sel Street      City      St   Cty      Date
_ 121 SOUTH STREET  JEFF      MO   051    10 11 2000
Provider : 009-706 User ID : MZROWLC

_ 121 SOUTH STREET  JEFFERSON CITY MO   051    10 03 2000
Provider : 021-722 User ID : MZROWLC

MORE      +

F1=HELP  F2=DETAIL  F3=RETURN  F6=REFRESH  F7=BWD  F8=FWD  F9=DEMO
```

CLIENT ADDRESS MAINTENANCE

(F2 DETAIL FROM ABOVE SCREEN)

Y070

_ Add (A) Delete (D)

```
DMH - CTRAC                                11-09-2000
Client Address Maintenance                  09:59:42

Client Last Name/Suf : DOE                  / JR      Chart Number : 001 9003434
Client First Name/MI : JOHN                 / H      State ID      : 402362

Input Previous Address information, select desired action and press ENTER.

Effective Date   : 10 15 2000

Street           : 47 LEE DRIVE_____
                  : _____
City             : JEFFERSON CITY___
State            : MO  +
Zip Code         : 65101_____
County           : 051 + COLE
CPS Service Area : 11                Creation Provider : 001-665
Census Tract     :                   User ID           : MZROWLC

AA017-I: Successfully ADDED
F1=HELP  F3=RETURN  F4=PROMPT  F5=CLEAR  F9=DEMOGRAPHICS
```

CTRAC Online User's Guide – Appendix A

CLIENT PREFERRED LANGUAGE MAINTENANCE

(FROM Y124 – SUB MENU -- OPTION 10 – DEMOGRAPHICS -- F10)

Y233 _ Add (A) Delete (D) Update U)

| | |
|---------------------------------------|------------|
| DMH - CTRAC | 11-09-2000 |
| Client Preferred Language Maintenance | 10:32:25 |

| | | |
|-----------------------------|------|----------------------------|
| Client Last Name/Suf : DOE | / JR | Chart Number : 001 9003434 |
| Client First Name/MI : JOHN | / H | State ID : 402362 |

Enter Language information, desired action and press ENTER.

Preferred Language Group : 01 +

English

Specific Language/Dialect (if known) :

F1=HELP F3=RETURN F4=PROMPT F6=REFRESH F12=CANCEL

CTRAC Online User's Guide – Appendix A

CLIENT CHART LIST/SELECT

(FROM Y124 – SUB MENU -- OPTION 20 – CHART)

Y106

```
DMH - CTRAC                                10-24-2000
Client Chart List/Select                    13:29:35

Client Last Name/Suf : DOE                  / JR      Chart Number : 001 9003434
Client First Name/MI : JOHN                 / H        State Id   : 402362

      Select (/) a Chart and press (F2) DETAIL.

Sel Provider  Division  Principal          Conditional      Principle
Number                               Program Class    Release           Diagnosis
_   001-665    C CPS      O Outpatient
      A ADA      1 Inpatient

More

F1=HELP  F2=DETAIL  F3=RETURN  F6=REFRESH  F7=BWD  F8=FWD  F9=HOME
```

CLIENT CHART MAINTENANCE

(F2 DETAIL FROM ABOVE SCREEN)

Y107

```
_   Delete (D)   Update (U)

DMH - CTRAC                                10-24-2000
Client Chart Maintenance                    13:30:25

Client Last Name/Suf : DOE                  / JR      Chart Number : 001 9003434
Client First Name/MI : JOHN                 / H        State Id   : 402362
                                           Provider Number : 001-665

      Input Chart Information, select desired Action and press ENTER.

Division : C CPS  Prin Prog Class : O Outpatient      Prin Diag Code :
          A ADA      1 Inpatient

Conditional Release Code : ____ (552=Forensic, 632=Civil, 700=Both)
Title XIX Food Ind       : N      (Y/N)
POS Contract Ind         : N      (Y/N)
POS Services Ind         : N      (Y/N)
Client Screening Result  : _      (D/N)  (D=DMH, N=Non-DMH)
MRDD Medicaid Waiver Ind : _      (Y/N)

F1=HELP  F3=RETURN  F6=REFRESH  F9=HOME  F12=CANCEL  F15=MENU
F16=COMMENT  F17=CASE-MANAGER  F18=PROVIDER-EPIS  F19=CHILD-ASSESMENT
```

CTRAC Online User's Guide – Appendix A

PROVIDER COMMENT LIST/SELECT

(FROM Y124 – SUB MENU -- OPTION 20 -> CHART – Y106 LIST -> Y107 MTCE -> F16)

Y111

```
DMH - CTRAC                                11-09-2000
Provider Comment List/Select                11:07:23
Client Last Name/Suf : DOE                  / JR    Chart Number   : 001 9003434
Client First Name/MI : JOHN                 / H    State Id      : 402362
                                                Provider Number : 001-665
```

Sel Date Select (/) a Provider Comment and press (F2) DETAIL.

_ 11-09-2000

THIS IS AN AREA FOR COMMENTS.

_ 11-09-2000

THIS COULD BE ANOTHER COMMENT ADDED ON THE SAME OR DIFFERENT DATE.

MORE

F1=HELP F2=DETAIL F3=RETURN F6=REFRESH F7=BWD F8=FWD F9=HOME

PROVIDER COMMENT MAINTENANCE

(F2 DETAIL FROM ABOVE SCREEN)

Y112 _ Add (A) Delete (D) Update (U)

```
DMH - CTRAC                                11-09-2000
Provider Comment Maintenance                11:09:44
Client Last Name/Suf : DOE                  / JR    Chart Number   : 001 9003434
Client First Name/MI : JOHN                 / H    State Id      : 402362
                                                Provider Number : 001-665
```

Input Provider Comment Information, select desired Action and press ENTER.

Comment Date : 11 09 2000

THIS COULD BE ANOTHER COMMENT ADDED ON THE SAME OR DIFFERENT DATE.____

Last Updated: 11/09/2000 by: MZROWLC

F1=HELP F3=RETURN F5=CLEAR F6=REFRESH F9=HOME

CTRAC Online User's Guide – Appendix A

CHART CASE MANAGER LIST/SELECT

(FROM Y124 – SUB MENU -- OPTION 20 → CHART – Y106 LIST → Y107 MTCE → F17)

Y131

```
DMH - CTRAC                                11-09-2000
Chart Case Manager List/Select              11:26:25

Client Last Name/Suf : DOE                  / JR    Chart Number   : 001 9003434
Client First Name/MI : JOHN                 / H    State Id      : 402362
                                                Provider Number : 001-665
```

Select (/) a Case Manager and press (F2) DETAIL.

| Sel | Case Manager SSN | Begin Date | End Date | Case Manager Last Name |
|-----|---------------------|------------|----------|---------------------------|
| _ | 500-00-1212 | 01-10-2000 | | DENNISON |

MORE

F1=HELP F2=DETAIL F3=RETURN F6=REFRESH F7=BWD F8=FWD F9=HOME

CHART CASE MANAGER MAINTENANCE

(F2 DETAIL FROM ABOVE SCREEN)

Y132 _ Add (A) Delete (D) Update (U)

```
DMH - CTRAC                                11-09-2000
Chart Case Manager Maintenance              11:42:45

Client Last Name/Suf : DOE                  / JR    Chart Number   : 001 9003434
Client First Name/MI : JOHN                 / H    State Id      : 402362
                                                Provider Number : 001-665
```

Select desired Action, input Case Manager Information and press ENTER.

Begin Date : 01 10 2000

End Date : MM DD YYYY

Case Manager SSN : 500 00 1212 + DENNISON

F1=HELP F3=RETURN F4=PROMPT F5=CLEAR F6=REFRESH F9=HOME F12=CANCEL

CTRAC Online User's Guide – Appendix A

CHILD ASSESSMENT LIST/SELECT

(FROM Y124 – SUB MENU -- OPTION 20 -> CHART – Y106 LIST -> Y107 MTCE -> F19) OR
(FROM Y124 – SUB MENU -- OPTION 70 -> CHILD ASSESSMENT)

Y129

```

DMH - CTRAC                                     11-09-2000
Child Assessment List/Select                     12:03:42

Client Last Name/Suf : DOE                      / JR      Chart Number : 001 9003434
Client First Name/MI : JOHN                     / H      State Id      : 402362

      Select (/) a Child Assessment and press (F2) DETAIL.

Sel      Assessment      Assessment      Category      Achenbach      Provider
      Date              Time
_      11 01 2000        00:00          A              CBCL              Number
                                           001-665

                                           MORE

CH084-I: Enter a selection.
F1=HELP  F2=DETAIL  F3=RETURN  F6=REFRESH  F7=BWD  F8=FWD  F9=HOME
```

CHILD ASSESSMENT MAINTENANCE

(F2 DETAIL FROM ABOVE SCREEN)

Y130

```

_      Add(A)      Delete(D)

DMH - CTRAC                                     11-09-2000
Child Assessment Maintenance                     12:04:36

Client Last Name/Suf : DOE                      / JR      Chart Number      : 001 9003434
Client First Name/MI : JOHN                     / H      State Id        : 402362
                                           Provider Number : 001-665

      Input Child Assessment Information, select desired Action and press ENTER.

Assessment Date   : 11 01 2000
Assessment Time   : 00 00 (HH MM)
Category          : A + Children experiencing acute psychiatric conditions
Assessors SSN     : 962 14 5873 + BARSTOW

Child Living Status : 6 + Child - Status A Other
Child School Status : _ +
Child Court Status  : _ +
Achenbach CBCL     : ____ (1 - 232)

AA019-I: Successfully DISPLAYED
F1=HELP  F3=RETURN  F4=PROMPT  F5=CLEAR  F9=HOME  F12=CANCEL
```

CTRAC Online User's Guide – Appendix A

PROVIDER EPISODE LIST/SELECT

(FROM Y124 – SUB MENU -- OPTION 30 – PROVIDER EPISODE)

Y108

```
DMH - CTRAC                                     11-09-2000
Provider Episode List/Select                     12:06:39

Client Last Name/Suf : DOE                       / JR      Chart Number : 001 9003434
Client First Name/MI : JOHN                      / H      State Id   : 402362
```

Select (/) a Provider Episode and press (F2) DETAIL.

| Sel | Date | Type | Ref | Care | Date | Status | Ref | DMH | Number | Provider Name |
|-----|------------|------|-----|------|------------|--------|-----|-----|---------|-----------------|
| _ | 01 10 2000 | R | 19 | | | | | N | 001-665 | FULTON STATE HS |
| _ | 08 01 1999 | F | 19 | | 09 30 1999 | 02 | 99 | N | 001-665 | FULTON STATE HS |

More

F1=HELP F2=DETAIL F3=RETURN F6=REFRESH F7=BWD F8=FWD F9=HOME

PROVIDER EPISODE MAINTENANCE

(F2 DETAIL FROM ABOVE SCREEN)

Y109

_ Delete (D) Update (U)

```
DMH - CTRAC                                     11-09-2000
Provider Episode Maintenance                     12:09:09
```

```
Client Last Name/Suf : DOE                       / JR      Chart Number : 001 9003434
Client First Name/MI : JOHN                      / H      State Id   : 402362
Provider Number : 001-665
```

Input Provider Episode Information, select desired Action and press ENTER.

```
Admission Date       : 01 10 2000
Admission Time       : 11 00 (HH MM)
Admission Type Code  : R      (R=ReAdmit, F=First Admit, T=Transfer)
Referral Source Code : 19 +   SELF
Non DMH Care Level   : _      (I=Inpatient, O=Outpatient, N=None)
Non DMH Client Ind   : N      (Y/N)
Discontinuation Date : MM DD YYYY
Discontinuation Time : 00 00 (HH MM)
Discontinuation Status : _ +
Discontinuation Referral : _ +
Transfer Reason      : _____
```

F1=HELP F3=RETURN F4=PROMPT F6=REFRESH F9=HOME F12=CANCEL F15=MENU
F16=TEAM F17=DIAG F18=ADA-DEMO F19=PROG-EPIS F20=COMMITMENT F21=ADA-PUBLIC-ASST

CTRAC Online User's Guide – Appendix A

CLIENT TREATMENT TEAM LIST/SELECT

(FROM Y124 – SUB MENU -- OPTION 30 – PROVIDER EPISODE → F16)

Y113

DMH - CTRAC 11-09-2000
Client Treatment Team List/Select 12:44:00

Client Last Name/Suf : DOE / JR Chart Number : 001 9003434
Client First Name/MI : JOHN / H State Id : 402362
Episode Admission Date : 01 10 2000 Provider Number : 001-665

Select (/) a Client Treatment Team and press (F2) DETAIL.

| Sel | Team Name | Begin Date | End Date |
|-----|-----------|------------|----------|
| _ | CANARY | 03 01 2000 | |

MORE

F1=HELP F2=DETAIL F3=RETURN F6=REFRESH F7=BWD F8=BWD F9=HOME

CLIENT TREATMENT TEAM MAINTENANCE

(F2 DETAIL FROM ABOVE SCREEN)

Y114 _ Add (A) Delete (D) Update (U)

DMH - CTRAC 11-09-2000
Client Treatment Team Maintenance 12:45:48

Client Last Name/Suf : DOE / JR Chart Number : 001 9003434
Client First name/MI : JOHN / H State Id : 402362
Episode Admission Date : 01 10 2000 Provider Number : 001-665

Begin Date : 03 01 2000

End Date : MM DD YYYY

Team Name : CANARY_____

AA019-I: Successfully DISPLAYED

F1=HELP F3=RETURN F5=CLEAR F9=HOME F12=CANCEL

CTRAC Online User's Guide – Appendix A

ADMISSION/COMMITMENT LIST/SELECT

(FROM Y124 – SUB MENU -- OPTION 30 – PROVIDER EPISODE → F20 for modifications) OR
(FROM Y124 – SUB MENU -- OPTION 40 – ADMISSION COMMITMENTS)

Y110

```
DMH - CTRAC                                     11-09-2000
Admission/Commitment List/Select                13:12:51

Client Last Name/Suf   : DOE                      / JR   Chart Number : 001 9003434
Client First Name/MI   : JOHN                     / H   State Id      : 402362
Episode Admission Date : 01 10 2000

Select (/) an Admission/Commitment and press (F2) DETAIL.

Sel  Type   Begin Date   End Date   Div  County  Length   Primary   Provider
     Code                                Code  (Days)  Commit Ind   Number
-   210     02 15 2000                C   051                N     001-665
-   400     02 10 2000    02 25 2000  A   051                N     001-665
-   200     01 10 2000                A   051                Y     001-665

MORE

F1=HELP  F2=DETAIL  F3=RETURN  F6=REFRESH  F7=BWD  F8=FWD  F9=HOME
```

ADMISSION/COMMITMENT MAINTENANCE

(F2 DETAIL FROM ABOVE SCREEN)

Y120

```
_   Add (A)   Delete (D)   Update (U)

DMH - CTRAC                                     11-09-2000
Admission/Commitment Maintenance                13:15:45

Client Last Name/Suf   : DOE                      / JR   Chart Number   : 001 9003434
Client First Name/MI   : JOHN                     / H   State Id      : 402362
Episode Admission Date : 01 10 2000                Provider Number : 001-665

Input Admission/Commitment Information, and press ENTER.

Type                  : 210 + ADULT BY GUARDIAN
Begin Date            : 02 15 2000
End Date              : MM DD YYYY
Division              : C   + CPS
County                : 051 + COLE
Length of Commitment (Days) : ____ (000, 004, 021, 030, 090, 365)
Primary Commitment Ind : N   (Y/N)

F1=HELP  F3=RETURN  F4=PROMPT  F5=CLEAR  F6=REFRESH  F9=HOME  F12=CANCEL
```

CTRAC Online User's Guide – Appendix A

DIAGNOSIS EPISODE LIST/SELECT

(FROM Y124 – SUB MENU -- OPTION 30 – PROVIDER EPISODE → F17 for modifications) OR
(FROM Y124 – SUB MENU -- OPTION 50 – DIAGNOSIS for viewing)

Y146

```
DMH - CTRAC                                11-09-2000
Diagnosis Episode List/Select              12:56:09

Client Last Name/Suf   : DOE                / JR      Chart Number : 001 9003434
Client First Name/MI   : JOHN               / H        State Id    : 402362
Episode Admission Date : 01 10 2000
```

Select (/) a Diagnosis Episode and press (F2) DETAIL.

| Sel | Diag. Date | Diagnosis Type | Program Category | Division | Provider Number |
|-----|------------|----------------|------------------|----------|-----------------|
| _ | 02 01 2000 | W Working | 1 InPat | A ADA | 001-665 |
| _ | 01 10 2000 | A Admitting | 1 InPat | A ADA | 001-665 |

MORE

F1=HELP F2=DETAIL F3=RETURN F6=REFRESH F7=BWD F8=FWD F9=HOME

DIAGNOSIS EPISODE LIST/MAINTENANCE

(F2 DETAIL FROM ABOVE SCREEN)

Y148

_ Add (A) Delete (D) Update (U)

```
DMH - CTRAC                                11-09-2000
Diagnosis Episode List/Maintenance        13:00:08
```

```
Client Last Name/Suf   : DOE                / JR      Chart Number : 001 9003434
Client First Name/MI   : JOHN               / H        State Id    : 402362
Episode Admission Date : 01 10 2000          Provider Number : 001-665
```

Input Diagnosis Episode Information, select desired Action and press ENTER.

```
Diagnosis Type : W + Work      Program Category : 1 (1=InPt, 2=Resd, 3=OutPt)
Diagnosis Date : 02 01 2000    Diagnosis Time   : 12 00 (HH MM)
Division       : A + ADA       Clinician SSN    : 500 00 1212 + DENNISON
```

| | System | Code | Lvl | Code | Lvl | Code | Lvl | Code | Lvl | Code | Lvl |
|----------|--------|-------|-----|-------|-----|-------|-----|-------|-----|-------|-----|
| Axis I | DSMIV | 29041 | P | _____ | - | _____ | - | _____ | - | _____ | - |
| Axis II | DSMIV | _____ | - | _____ | - | _____ | - | _____ | - | _____ | - |
| Axis III | ICD9 | _____ | - | _____ | - | _____ | - | _____ | - | _____ | - |
| Axis IV | DSMIV | _____ | - | _____ | - | _____ | - | _____ | - | _____ | - |
| Axis V | DSMIV | _____ | - | _____ | - | _____ | - | _____ | - | _____ | - |

(C=Current, Y=Past)

AA019-I: Successfully DISPLAYED

F1=HELP F3=RETURN F4=PROMPT F5=CLEAR F6=REFRESH F7=BWD F8=FWD

F9=HOME F10=ALL-DIAG-CODES F11=AXIS-IV/V-CODES F12=CANCEL

CTRAC Online User's Guide – Appendix A

ADA ADDITIONAL DEMOGRAPHICS MAINTENANCE

(FROM Y124 – SUB MENU -- OPTION 30 – PROVIDER EPISODE → F18)

| | | |
|-------------|------------|------------|
| Y121 | Update (U) | Delete (D) |
|-------------|------------|------------|

| | | |
|---|--|------------|
| DMH - CTRAC | | 11-09-2000 |
| ADA Additional Demographics Maintenance | | 13:02:53 |

Client Last Name/Suf : DOE / JR Chart Number : 001 9003434
Client First Name/MI : JOHN / H State Id : 402362
Episode Admission Date : 01 10 2000 Provider Number : 001-665

Input ADA Additional Demographics Information and Press ENTER.

Hispanic : 01 + Puerto Rican
Number of Children : 02 Veteran Status : 2 (1=Yes, 2=No)
Race Code : 01 + Referral Source Code : 19 +
Monthly Income (\$) : 1123 (0000-9999) Family Size (Pov Level) : 03 (01-99)
Prior DETOX Code : 0 + 0 Previous Episodes. Number of Arrests : 00
Prior Resid. Code : 0 + 0 Previous Episodes. No. of DWI Arrests : 00
Prior Outpat. Code : 0 + 0 Previous Episodes.
Codependent Indicator : N (Y/N) Primary Abuser State Id : _____
Pregnant at Admission Code : 2 (1=Yes, 2=No) TB Indicator : N (Y/N)
Primary Source of Payment : 05 + OTHER GOVERNMENT PAYMENTS

Arrests in Trmt (97=Unknown): _ Self Help PGM Code : _ +
HIV Test Code : _ +
AA019-I: Successfully DISPLAYED
F1=HELP F3=RETURN F4=PROMPT F6=REFRESH F9=HOME F12=CANCEL

ADA PUBLIC ASSISTANCE LIST / UPDATE

(FROM Y124 – SUB MENU -- OPTION 30 – PROVIDER EPISODE → F21)

| | | | |
|-------------|---|---------|------------|
| Y226 | _ | Add (A) | Delete (D) |
|-------------|---|---------|------------|

| | | |
|---------------------------------|--|------------|
| DMH - CTRAC | | 11-09-2000 |
| Public Assistance List / Update | | 13:36:39 |

Client Last Name / Suf : DOE / JR Chart Number : 001 9003434
Client First Name / MI : JOHN / H State Id : 402362
Episode Admission Date : 01 10 2000 Provider Number : 001-665

Enter code to add, or select (/) code to delete,
enter desired action and press ENTER.

| Sel | Code | Description | Creation Date |
|-----|------|---------------------|---------------|
| _ | 03 + | FOOD STAMPS | 11-09-2000 |
| _ | 37 + | GOVERNMENT PENSIONS | 11-09-2000 |
| _ | __ + | | |
| _ | __ + | | |
| _ | __ + | | |
| _ | __ + | | |
| _ | __ + | | |
| _ | __ + | | |
| _ | __ + | | |

MORE

F1=HELP F3=RETURN F4=PROMPT F6=REFRESH F7=BWD F8=FWD F9=HOME F12=CANCEL

CTRAC Online User's Guide – Appendix A

PROGRAM EPISODE LIST/SELECT

(FROM Y124 – SUB MENU -- OPTION 30 – PROVIDER EPISODE MTCE → F19 for modifications) OR
(FROM Y124 – SUB MENU -- OPTION 60 – PROGRAM EPISODE)

Y182

| | |
|-----------------------------|------------|
| DMH - CTRAC | 11-09-2000 |
| Program Episode List/Select | 13:06:35 |

Client Last Name/Suf : DOE / JR Chart Number : 001 9003434
Client First Name/MI : JOHN / H State Id : 402362
Provider Adm. Date : 01 10 2000
Select (/) a Program Episode and Press (F2) DETAIL.

| Sel | Treatment Program | Begin Date | End Date | Provider Number | Provider Name |
|-----|-------------------|------------|----------|-----------------|-----------------------|
| _ | 111 Social Set | 01 10 2000 | | 001-665 | FULTON STATE HOSPITAL |

MORE

F1=HELP F2=DETAIL F3=RETURN F6=REFRESH F7=BWD F8=FWD F9=HOME

PROGRAM EPISODE MAINTENANCE

(F2 DETAIL FROM ABOVE SCREEN)

Y183

_ Add (A) Delete (D) Update (U)

| | |
|-----------------------------|------------|
| DMH - CTRAC | 11-09-2000 |
| Program Episode Maintenance | 13:09:36 |

Client Last Name/Suf : DOE / JR Chart Number : 001 9003434
Client First Name/MI : JOHN / H State Id : 402362
Provider Adm. Date : 01 10 2000 Provider Number : 001-665

Input Program Episode Information, Select desired Action and Press ENTER.

| | |
|--|----------------------|
| Division : A + ADA | Previous Program: |
| Treatment Pgm Cd : 111 + Social Setting Detoxifica | |
| Open Date : 01 10 2000 | Division : |
| Open Time : 11 00 (HH MM) | Open Date : |
| Location Number : 001 + | Close Date : |
| ADA Federal Id : M0900305 | Close Time : (HH MM) |
| Placement Prov : | |
| Program Class : 1 In Patient | |
| Close Date : MM DD YYYY | |
| Close Time : 00 00 (HH MM) | |

AA019-I: Successfully DISPLAYED

F1=HELP F3=RETURN F4=PROMPT F5=CLEAR F9=HOME F12=CANCEL F15=MENU
F16=STATUS F17=WARD-EPIS F18=ADA-STATS F19=ADA-ABUSE F20=MM-IND

CTRAC Online User's Guide – Appendix A

PROGRAM EPISODE STATUS LIST/SELECT

(FROM Y124 – SUB MENU -- OPTION 30 – PROVIDER EPISODE MTCE → F19 PROGRAM EPISODE MTCE→ F16)

Y184

```
DMH - CTRAC                                     11-09-2000
Program Episode Status List/Select              13:43:46

Client Last Name/Suf : DOE                      / JR    Chart Number    : 001 9003434
Client First Name/MI : JOHN                     / H    State Id       : 402362
Program Episode Date : 01 10 2000                Provider Number : 001-665
```

Select (/) a Program Episode Status and press (F2) DETAIL.

| Sel | Status Code | Effective Date | End Date | Proposed AA Return Date |
|-----|-------------|----------------|------------|-------------------------|
| _ | 14 | 02 10 2000 | 02 20 2000 | |

MORE

F1=HELP F2=DETAIL F3=RETURN F6=REFRESH F7=BWD F8=FWD F9=HOME

PROGRAM EPISODE STATUS MAINTENANCE

(F2 DETAIL FROM ABOVE SCREEN)

Y185

_ Add (A) Delete (D) Update (U)

```
DMH - CTRAC                                     11-09-2000
Program Episode Status Maintenance              13:47:57

Client Last Name/Suf : DOE                      / JR    Chart Number    : 001 9003434
Client First Name/MI : JOHN                     / H    State Id       : 402362
Program Episode Date : 01 10 2000                Provider Number : 001-665
```

Input Program Episode Status Information, select desired Action and press ENTER.

```
Status Code           : 14 + Inactive-Forensic Separation
Effective Date         : 02 10 2000
Effective Time         : 11 00 (HH MM)

End Date               : 02 20 2000
End Time               : 11 00 (HH MM)
Proposed AA Return Date : MM DD YYYY
```

AA019-I: Successfully DISPLAYED

F1=HELP F3=RETURN F4=PROMPT F5=CLEAR F9=HOME F12=CANCEL

CTRAC Online User's Guide – Appendix A

PROGRAM WARD EPISODE LIST/SELECT

(FROM Y124 – SUB MENU -- OPTION 30 – PROVIDER EPISODE MTCE → F19 PROGRAM EPISODE MTCE→ F17) OR
(FROM Y124 – SUB MENU -- OPTION 65 – PROGRAM WARD EPISODE)

Y186

```

                                DMH - CTRAC                                11-09-2000
                                Program Ward Episode List/Select          13:50:06

Client Last Name/Suf : DOE           / JR      Chart Number      : 001 9003434
Client First Name/MI : JOHN          / H       State Id         : 402362
Program Episode Date : 01 10 2000      Provider Number : 001-665

      Select (/) a Program Ward Episode and Press (F2) DETAIL.

Sel  Unit   Ward      Ward      Begin Date   End Date   Home
   Program Code      Description                               Ward
  _   42 0    PFS  PROF. SERV. EDUCATION      01-10-2000              N

                                                                MORE

F1=HELP  F2=DETAIL  F3=RETURN  F6=REFRESH  F7=BWD  F8=FWD  F9=HOME  F12=CANCEL
```

PROGRAM WARD EPISODE MAINTENANCE

(F2 DETAIL FROM ABOVE SCREEN)

Y187

```

_   Add (A)   Delete (D)   Update (U)

                                DMH - CTRAC                                11-09-2000
                                Program Ward Episode Maintenance          13:53:37

Client Last Name/Suf : DOE           / JR      Chart Number      : 001 9003434
Client First Name/MI : JOHN          / H       State Id         : 402362
Program Episode Date : 01 10 2000      Provider Number : 001-665

      Input Program Ward Episode Information, select desired Action and press ENTER.

Unit Program      : 42  + Education Therapy
Unit Pgm Subclass : 0   + UNIT PRGM SUBCLASS - CONV
Ward Code         : PFS + PROF. SERV. EDUCATION
Home Ward Indicator : N   (Y/N)

Begin Date        : 01 10 2000
Begin Time        : 11 00   (HH MM)

End Date          : MM DD YYYY
End Time          : 00 00   (HH MM)

AA019-I: Successfully DISPLAYED
F1=HELP  F3=RETURN  F4=PROMPT  F5=CLEAR  F6=REFRESH  F9=HOME  F12=CANCEL
```

CTRAC Online User's Guide – Appendix A

PROGRAM ADA STATISTICS LIST/SELECT

(FROM Y124 – SUB MENU -- OPTION 30 – PROVIDER EPISODE MTCE → F19 PROGRAM EPISODE MTCE → F18)

Y188

```
DMH - CTRAC                                11-09-2000
Program ADA Statistics List/Select          13:57:48

Client Last Name/Suf : DOE                  / JR   Chart Number   : 001 9003434
Client First Name/MI : JOHN                 / H     State Id      : 402362
Program Episode Date : 01 10 2000           Provider Number : 001-665
```

Select (/) a Program ADA Statistic and press (F2) DETAIL.

| Sel | Activity Type | Employment Status | Legal Status | Income Source | Addl Psych Problem Ind | Education Prog Ind | Success Indicator |
|-----|---------------|-------------------|--------------|---------------|------------------------|--------------------|-------------------|
| _ | 0 | 2 | 2 | 02 | 2 | | |

F1=HELP F2=DETAIL F3=RETURN F6=REFRESH F9=HOME

PROGRAM ADA STATISTICS MAINTENANCE

(F2 DETAIL FROM ABOVE SCREEN)

Y189

_ Add (A) Delete (D) Update (U)

```
DMH - CTRAC                                11-09-2000
Program ADA Statistics Maintenance          13:59:22

Client Last Name/Suf : DOE                  / JR   Chart Number   : 001 9003434
Client First Name/MI : JOHN                 / H     State Id      : 402362
Program Episode Date : 01 10 2000           Provider Number : 001-665
```

Input Program ADA Statistics Info, select desired Action and press ENTER.

```
Activity Type           : 0   (O=Open, C=Close)
Employment Status       : 2   + Unemployed has seek emplymnt last 30 dys
Legal Status            : 2   + Awaiting Disposition
Income Source           : 02  + Employment
Addl Psychiatric Problem Ind : 2   (1=Yes, 2=No)
Education Program Indicator : _   +
Program Success Indicator : _   (Y=Yes, N=No)
Education Level         : 12  + High School Graduate/GED
Special Education Code   : 20  + Resource room
Living Arrangement       : 11  + (18+) With Family
Marital Status           : 1   + Never Married
Occupation               : 05  + Sales Workers
Weekly Income           : 05  + $200 - $299
```

AA019-I: Successfully DISPLAYED

F1=HELP F3=RETURN F4=PROMPT F5=CLEAR F9=HOME F12=CANCEL

CTRAC Online User's Guide – Appendix A

PROGRAM ADA SUBSTANCE ABUSE LIST/SELECT

(FROM Y124 – SUB MENU -- OPTION 30 – PROVIDER EPISODE MTCE → F19 PROGRAM EPISODE MTCE → F19)

Y191

```
DMH - CTRAC                                     11-09-2000
Program ADA Substance Abuse List/Select          14:01:02

Client Last Name/Suf : DOE                      / JR      Chart Number   : 001 9003434
Client First Name/MI : JOHN                     / H      State Id      : 402362
Program Episode Date : 01-10-2000               Provider Number : 001-665
```

Select (/) a Program ADA Substance Abuse and press (F2) DETAIL.

| Sel | Act Type | Category Type | Drug Used Code | Frequency Of Use Code | Administer Route Code | Age Drug First Used | Medication Prescribed Code | Methadone Use Plan Indicator |
|-----|----------|---------------|----------------|-----------------------|-----------------------|---------------------|----------------------------|------------------------------|
| _ | O | P | 0201 | 01 | 1 | 22 | 01 | 1 |
| _ | O | S | 9996 | 01 | 0 | 99 | | |
| _ | O | T | 9996 | 01 | 0 | 99 | | |

F1=HELP F2=DETAIL F3=RETURN F6=REFRESH F9=HOME

PROGRAM ADA SUBSTANCE ABUSE MAINTENANCE

(F2 DETAIL FROM ABOVE SCREEN)

Y190 _ Add(A) Delete(D) Update(U)

```
DMH - CTRAC                                     11-09-2000
Program ADA Substance Abuse Maintenance          14:02:08

Client Last Name/Suf : DOE                      / JR      Chart Number   : 001 9003434
Client First Name/MI : JOHN                     / H      State Id      : 402362
Program Episode Date : 01 10 2000               Provider Number : 001-665
```

Input ADA Substance Abuse Information, select desired Action and press ENTER.

| --Open Activity-- | Primary | Secondary | Tertiary |
|-----------------------|------------------|----------------|----------------|
| Drug Used | : 0201 + ALCOHOL | 9996 + NONE | 9996 + NONE |
| Frequency Of Use | : 01 + No Past M | 01 + No Past M | 01 + No Past M |
| Administration Route | : 1 + Oral | 0 + No Drug U | 0 + No Drug U |
| Age Drug First Used | : 22 | 99 None | 99 None |
| Medication Prescribed | : 01 + Methadone | | |
| Methadone Use Plan | : 1 Yes | | |

Age Codes: 00=Newborn, 01-96=Actual Age, 99=None

Methadone Indicator Codes: 1=Yes, 2=No

F3=RETURN F4=PROMPT F5=CLEAR F6=REFRESH F9=HOME F10=OPEN/CLOSE F12=CANCEL

CTRAC Online User's Guide – Appendix A

PROGRAM MEDICAID MEDICARE INDICATOR LIST/SELECT

(FROM Y124 – SUB MENU -- OPTION 30 – PROVIDER EPISODE MTCE → F19 PROGRAM EPISODE MTCE→ F20)

Y215

```
DMH - CTRAC                                11-09-2000
Program Medicaid Medicare Indicator List/Select  14:06:31

Client Last Name/Suf : DOE                / JR   Chart Number      : 001 9003434
Client First Name/MI : JOHN               / H    State Id         : 402362
Program Episode Date : 01 10 2000         Provider Number  : 001-665
```

Select (/) a Program Mcaid Mcare Ind and press (F2) DETAIL.

| Sel | Type | Description | Effective Date | End Date | Family Size |
|-----|------|-----------------|----------------|----------|-------------|
| _ | 02 | CSTAR - LEVEL 2 | 02 01 2000 | | 03 |

MORE

F1=HELP F2=DETAIL F3=RETURN F6=REFRESH F7=BWD F8=FWD F9=HOME F12=CANCEL

PROGRAM MEDICAID MEDICARE INDICATOR MAINTENANCE

(F2 DETAIL FROM ABOVE SCREEN)

Y216

_ Add (A) Delete (D) Update (U)

```
DMH - CTRAC                                11-09-2000
Program Medicaid Medicare Indicator Maintenance  14:07:17

Client Last Name/Suf : DOE                / JR   Chart Number      : 001 9003434
Client First Name/MI : JOHN               / H    State Id         : 402362
Program Episode Date : 01 10 2000         Provider Number  : 001-665
```

Input Program Mcaid Mcare Ind Info, select desired Action and press ENTER.

```
Program Type      : 02 + CSTAR - LEVEL 2
Effective Date    : 02 01 2000
End Date         : MM DD YYYY
Family Size       : 03 (Specify number from 00 to 30)
                  (Family Size Required for CSTAR Clients Only)
```

Primary Abuser State Id : _____
(Required for CSTAR Codependent Clients Only)

AA019-I: Successfully DISPLAYED

F1=HELP F3=RETURN F4=PROMPT F5=CLEAR F6=REFRESH F9=HOME F12=CANCEL

CTRAC Online User's Guide – Appendix A

STANDARD MEANS TEST SUMMARY LIST/SELECT

(FROM Y124 – SUB MENU -- OPTION 75 – STANDARD MEAN TEST SUMMARY)

Y227

```

                                DMH - CTRAC                                11-09-2000
                        Standard Means Test Summary List/Select          14:20:55

Client Last Name / Suf : DOE                / JR      Chart Number : 001 9003434
Client First Name / MI : JOHN               / H        State ID   : 402362

                        Select (/) a record and press (F2) DETAIL.

Sel   Begin      SMT      SMT      Household      Provider
      Date      Monthly Income Dependents Monthly Income
-    08-25-2000   000500      02                METRO ST. LOUIS
-    03-01-1999   001234      02                FULTON STATE HS
-    02-01-1999   002323      02                SW MO PSYCH REH
-    11-10-1998    111        03                DMH CENTRAL OFC
-    11-05-1998    54         00                FULTON STATE HS
-    01-01-1998   340        01                DMH CENTRAL OFC

                                                MORE

F1=HELP  F2=DETAIL  F3=RETURN  F6=REFRESH  F7=BWD  F8=FWD  F9=HOME
```

STANDARD MEANS TEST MAINTENANCE

(F2 DETAIL FROM ABOVE SCREEN)

Y228

```

_      Add (A)  Delete (D)  Update (U)

                                DMH - CTRAC                                11-09-2000
                        Standard Means Test Maintenance          14:23:48

Client LastName/Suf :  DOE                / JR      Chart Number : 001 9003434
Client First Name/MI :  JOHN               / H        State ID   : 402362

Input Standard Means Test Information, select desired action and press ENTER.

Begin Date           : 08 25 2000

End Date             : 08 24 2001   End date is automatically calculated
                                   as one year from the Begin Date.

SMT Dependents       : 02

SMT Monthly Income   : 000500

Household Income     : _____

Provider             : 009-706  METROPOLITAN ST LOUIS PSYCH.

F1=HELP  F3=RETURN  F5=CLEAR  F6=REFRESH  F9=HOME  F12=CANCEL  F15=MENU  F16=INS-LIST
```

CTRAC Online User's Guide – Appendix A

SMT PRIVATE INSURER LIST

(FROM Y124 – SUB MENU -- OPTION 75 – STANDARD MEAN TEST SUMMARY MTCE → F16)

Y229

DMH - CTRAC 11-09-2000
SMT Private Insurer List / Select 14:26:17

Client Last Name / Suf : DOE / JR Chart Number : 001 9003434
Client First Name / MI : JOHN / H State ID : 402362
SMT Date : 08-25-2000 End Date : 08-24-2001

Select (/) an Insurer record and Press (F2) Detail.

| Sel | Code | Insurer Name | Begin Date | End Date | Provider | ADA | CPS | MRDD | Bnft Exhausted? |
|-----|------|---------------------------|------------|----------|----------|-----|-----|------|-----------------|
| _ | 010 | AWMA GROUP HLTH & LIFE IN | 08-25-2000 | | 009-706 | | | | |
| _ | 010 | AWMA GROUP HLTH & LIFE IN | 08-25-2000 | | 009-706 | | | | |

MORE

CL152-I: Only Insurance within dates of selected STD Means Test are shown.
F1=HELP F2=INS-DETAILS F3=RETURN F6=REFRESH F7=BWD F8=FWD F9=HOME F12=CANCEL
F20=SHOW-ALL F21=SHOW-SELECTED-SMT

CTRAC Online User's Guide – Appendix A

ASI ASSESSMENTS RECEIVED LIST

(FROM Y124 – SUB MENU -- OPTION 80 – ISAP ASSESSMENT LIST)

YB37

| | |
|-------------------------------|------------|
| DMH - ISAP | 11-13-2000 |
| ASI Assessments Received List | 09:15:44 |

Enter a State Id or Chart Number, and press ENTER.

| | | | | | |
|-----------------|---|------------|-------------------|---|------|
| State Id | : | 402362____ | Client Last Name | : | DOE |
| Chart Number | : | ____ | Client First Name | : | JOHN |
| Provider Number | : | 001-665 | | | |

| | | | |
|------------|-----------------|----------|----------|
| Assessment | Assessment Name | Creation | Provider |
| Date | | Date | |

CH082-I: No information available to display.

F3=RETURN F5=CLEAR F7=BACKWARD F8=FORWARD F20=SHOW-ALL F21=ASI-ONLY

CTRAC Online User's Guide – Appendix A

MEDICAID ELIGIBILITY INFORMATION SYSTEM – SEARCH MENU

(FROM Y124 – SUB MENU -- OPTION 90 –MEIS SYSTEM)

Y028

| | |
|---|------------|
| DMH - Medicaid Eligibility Information System | 11-09-2000 |
| Search Menu | 14:48:56 |

Please key search criteria and then press ENTER OR
Key DCN or STATE ID and then press the appropriate FUNCTION KEY

| | | |
|------------------------|---|-----------|
| DCN | : | 38383324 |
| STATE ID | : | 000402362 |
| SSN | : | 343334441 |
| LAST NAME | : | DOE_____ |
| FIRST NAME | : | JOHN_____ |
| RACE (B/W/O) | : | W |
| SEX (M/F) | : | M |
| BIRTH YEAR (YYYY) : | : | 1940 |
| COUNTY | : | _____ |
| WIDE SEARCH (Y/N) : | : | __ |

F1=HELP F5=CLEAR F3/F15=DMH MENU F17=CUR ELIG F18=ELIG HIST
F19=MANAGED CARE F20=INSURANCE F21=MEDICARE F22=ADD'L DCN F23=CTRAC

CTRAC Online User's Guide – Appendix A

MAINTENANCE AND PROGRAMMING SUB-MENU

(FROM Y124 – SUB MENU -- OPTION 98 –MAINTENANCE MENU : DATA INTEGRITY)

Y142

| | |
|--------------------------------------|------------|
| DMH - CTRAC | 11-09-2000 |
| Maintenance and Programming Sub-Menu | 14:54:06 |
| Enter Client Id or Option | |

| | |
|------------------------|---------------------------|
| State Id : 402362____ | Client Last Name : DOE |
| Chart No : 001 9003434 | Provider Number : 001-665 |

- ___ 10 Data Integrity Program
- 20 Change Chart Number
- 30 Blank out Provider Discontinuation Date/Time
- 50 Client Deletions (DMH-CO only)
- 60 ISAP Deletions (ADA only)
- 99 Return to Sub-Menu

F3=RETURN F5=CLEAR F9=HOME

CTRAC Online User's Guide – Appendix A

DATA INTEGRITY

(FROM Y124 – SUB MENU -- OPTION 98 –MAINTENANCE MENU : DATA INTEGRITY → Y142 Maintenance Menu → Option 10)

Y091

| | |
|-----------------------------------|------------------------------------|
| DMH - CTRAC | 11-09-2000 |
| Data Integrity Program | 14:57:17 |
| State ID : 402362 | Provider Number : _____ |
| Chart No : _____ | |
| Client Last Name/Suf : DOE | / JR Last Update Date : 10-11-2000 |
| Client First Name/MI : JOHN | / H Last Update User : MZROWLC |
| Progress Ind (Orig) : 7 (New) : 5 | Total Charts : 000016 |

| Error Description | Provider | Admission | UserId | Err Cd |
|---------------------------------------|----------|------------|---------|--------|
| Open Prov Epis for deceased client. | 001-665 | 01-10-2000 | MZROWLC | E09 |
| Open Prov Epis for deceased client. | 002-683 | 03-01-2000 | MZROWLC | E09 |
| Open Prov Epis for deceased client. | 003-676 | 02-01-1999 | MROWLAC | E09 |
| Open Prov Epis for deceased client. | 004-655 | 01-15-1995 | MROWLAC | E09 |
| Open Prov Epis for deceased client. | 005-691 | 07-28-1999 | MZROWLC | E09 |
| Prov Epis has no Pgm Episodes. | 009-706 | 08-01-2000 | MZROWLC | P68 |
| Open Prov Epis for deceased client. | 018-771 | 09-01-1999 | MZROWLC | E09 |
| Open Prov Epis for deceased client. | 021-722 | 05-15-2000 | MZROWLC | E09 |
| Prov Epis has no Pgm Episodes. | 021-722 | 05-15-2000 | MZROWLC | P68 |
| Pgm Ward end date after Pgm Epis end. | 021-722 | 02-01-2000 | MZROWLC | P64 |
| Total Errors : 000018 | | | MORE | + |

F3=RETURN F5=CLEAR F7=BWD F8=FWD F9=HOME ENTER

CTRAC Online User's Guide – Appendix A

CHANGE CHART NUMBER

(FROM Y124 – SUB MENU -- OPTION 98 –MAINTENANCE MENU : DATA INTEGRITY → Y142 Maintenance Menu → Option 20)

Y118 Update (U)

| | |
|---------------------|------------|
| DMH - CTRAC | 11-09-2000 |
| Change Chart Number | 15:03:04 |

| | | | |
|-----------------------------|------|-----------------|--------------|
| Client Last Name/Suf : DOE | / JR | State Id | : 402362 |
| Client First Name/MI : JOHN | / H | Provider Number | : 001-665 |
| | | Original Admit | : 01-15-1995 |

Original Chart Number : 001 9003434

New Chart Number : ____

NOTE: Changes cannot be undone.

AA019-I: Successfully DISPLAYED
F1=HELP F3=RETURN F5=CLEAR F9=HOME

CTRAC Online User's Guide – Appendix A

BLANK OUT PROVIDER DISCONTINUATION DATE/TIME

PROVIDER EPISODE LIST/SELECT (SPECIAL PROCESSING)

(FROM Y124 – SUB MENU -- OPTION 98 –MAINTENANCE MENU : DATA INTEGRITY → Y142 Maintenance Menu → Option 30)

Y213

```

DMH - CTRAC                                     11-09-2000
Provider Episode List/Select (Special Processing) 15:05:41

Client Last Name/Suf : DOE                      / JR      Chart Number : 001 9003434
Client First Name/MI : JOHN                     / H      State Id : 402362

Select (/) a Provider Episode and press (F2) DETAIL.

----- Admission -----      ----- Discontinuation -----      Non-DMH Provider
Sel   Date      Type Referral Care      Date      Status Referral      Client      Number
-   01 10 2000   R      19                      09 30 1999   02      99      N      001-665
-   08 01 1999   F      19                      09 30 1999   02      99      N      001-665

More

F1=HELP  F2=DETAIL  F3=RETURN  F6=REFRESH  F7=BWD  F8=FWD  F9=HOME
```

BLANK OUT DISCONTINUATION DATE & TIME MAINTENANCE

(F2 DETAIL FROM ABOVE SCREEN)

Y214

```

_      Update (U)

DMH - CTRAC                                     11-09-2000
Blank Out Discontinuation Date & Time Maintenance 15:09:13

Client Last Name/Suf : DOE                      / JR      Chart Number : 001 9003434
Client First Name/MI : JOHN                     / H      State Id : 402362
                                           Provider Number : 001-665

Blank out Discontinuation Date & Time, select "U" and press ENTER.

Discontinuation Date      : XX XX XXXX      Admission Date : 01 10 2000
Discontinuation Time      : XX XX  (HH MM)   Admission Time : 11 00  (HH MM)
Discontinuation Status    :
Discontinuation Referral  :

NOTE: All associated episodes with the same date and time as Discontinuation
Date and Time will automatically be blanked out (i.e. 'opened').
>>>>> Go to regular screens to enter a new Discontinuation Date and Time. <<<<<

If this is for an ADA Client, the closing information for Statistics & Abuse
will be DELETED. Closing info on ADA Additional Demo will be blanked out.

F1=HELP  F3=RETURN  F6=REFRESH  F9=HOME  F12=CANCEL
```

CTRAC Online User's Guide – Appendix A

STAFF MEMBER LIST/SELECT

(FROM Y092 – MAIN MENU -- OPTION 25 – STAFF)

Y149

DMH - CTRAC 11-09-2000
Staff Member List/Select 15:13:29

Please key search criteria and press ENTER OR
Select (/) a Staff Member and press (F2) DETAIL.

Search Staff Name : _____

Search Staff SSN : _____

| Sel | Last Name | First Name | MI | Social Sec No | Active Indicator |
|-----|-----------|------------|----|---------------|------------------|
| _ | ABERLEY | ALBERT | | 989 55 1234 | Y |
| _ | ALBERT | FAT | | 565 55 4321 | Y |
| _ | APPLE | AARON | | 333 55 1234 | Y |
| _ | BARSTOW | HARVEY | | 962 55 1334 | Y |
| _ | BEEMER | BORGIE | | 555 55 1234 | Y |
| _ | BETHEW | WILLIAM | K | 466 55 4321 | Y |
| _ | BLOW | JOE | L | 498 55 1234 | Y |
| _ | BOGART | HUMPHREY | P | 425 55 1234 | Y |
| _ | BOGART | HUMPHREY | P | 505 55 1234 | N |

More +

F1=HELP F2=DETAIL F3=RETURN F6=REFRESH F7=BWD F8=FWD

STAFF MEMBER MAINTENANCE

(F2 DETAIL FROM ABOVE SCREEN)

Y150

_ Add(A) Update(U)

DMH - CTRAC 11-09-2000
Staff Member Maintenance 15:20:25

Input Staff Member Information, select desired Action and press ENTER OR
Press F10 to view Staff Provider Episodes.

Last Name : DENNISON_____ Social Security Number : 500 00 1212
First Name : SUSIE_____ Middle Initial : A

Title Index : 0035 + OFFICE SERVICES ASST

Unique Physician Id : _____

Active Indicator : Y (Y/N)

AA019-I: Successfully DISPLAYED

F1=HELP F3=RETURN F4=PROMPT F5=CLEAR F9=HOME F10=STAFF-PROV-EPIISODES F12=CANEL

CTRAC Online User's Guide – Appendix A

STAFF PROVIDER EPISODE LIST/SELECT

(F10 STAFF PROV EPISODES FROM Y150 - PREVIOUS SCREEN)

Y151

DMH - CTRAC 11-09-2000
Staff Provider Episode List/Select 15:22:59

Last Name : DENNISON Social Security Number : 500 00 1212
First Name : SUSIE Middle Initial : A

Please key search criteria and press ENTER OR
Select a Staff Provider Episode and press (F2) DETAIL.

Search for Date Established : MM DD YYYY

| Sel | Begin Date | End Date | Professional Category | Telephone Number | Provider Number |
|-----|------------|----------|-----------------------|------------------|-----------------|
| _ | 01 10 2000 | | 08 | | 001-665 |
| _ | 01 01 1999 | | 01 | | 005-691 |
| _ | 09 01 1998 | | 01 | | 009-706 |
| _ | 01 01 1994 | | 01 | 573 635 2001 | 008-650 |
| _ | 01 01 1994 | | 03 | | 5074444 |

More +

F1=HELP F2=DETAIL F3=RETURN F6=REFRESH F7=BWD F8=FWD F9=HOME

STAFF PROVIDER EPISODE MAINTENANCE

(F2 DETAIL FROM ABOVE SCREEN)

Y210

_ Add(A) Delete(D) Update(U)

DMH - CTRAC 11-09-2000
Staff Provider Episode Maintenance 15:30:30

Last Name : DENNISON Social Security Number : 500 00 1212
First Name : SUSIE Middle Initial : A

Input Staff Provider Episode Info, select desired Action and press ENTER.

Begin Date : 01 10 2000
End Date : MM DD YYYY
Professional Category : 08 + PSYCHIATRIST
Telephone Number : ____
Clinic Physician Id Number : ____
Medicare Caregiver Number : ____
Medicaid Physician Prov Number : ____
Provider Number : 001-665

AA019-I: Successfully DISPLAYED

F1=HELP F3=RETURN F4=PROMPT F5=CLEAR F9=HOME F12=CANCEL

CTRAC Online User's Guide – Appendix A

SUSPENDED BATCH LISTING

(FROM Y092 – MAIN MENU -- OPTION 30 – CLIENT BATCH MATCH)

Y193

DMH - CTRAC 11-13-2000
Suspended Batch Listing 09:20:35

Select (/) a Batch and press (F2) DETAIL or
Select (D) a Batch and press ENTER to Delete.

| Sel | Batch Number | Trans | Enter Date |
|-----|--------------|-------|------------|
| — | 997 | 11 15 | 2000 |
| — | 999 | 11 25 | 2000 |

Line 1 of 2

F1=HELP F2=DETAIL F3=RETURN F6=REFRESH F7=BWD F8=FWD

SUSPENDED CLIENT LISTING

(F2 DETAIL FROM ABOVE SCREEN)

Y198

DMH - CTRAC 11-13-2000
Suspended Client Listing 09:25:01

Select (/) the appropriate Client and press (F2) DETAIL or
Select (D) the appropriate Client and press ENTER to Delete.

| Sel | Last Name | First Name | Sex | Race | Birthdate | SSN |
|-----|-----------|------------|-----|------|------------|-------------|
| — | DENNISON | SUSAN | F | 01 | 08 30 1952 | 489 55 1234 |
| — | SMITH | JOHN | M | 01 | 09 12 1925 | 497 55 1234 |

Line 1 of 2

F1=HELP F2=DETAIL F3=RETURN F6=REFRESH F7=BWD F8=FWD F15=MENU

CTRAC Online User's Guide – Appendix A

CLIENT MATCH LISTING

(F2 DETAIL FROM Y198 PREVIOUS SCREEN)

Y209

```
DMH - CTRAC                                11-13-2000
Client Match Listing                        09:35:01
Select (/) the appropriate matching Client and press ENTER.

Client Last Name/Suf : SMITH                /      Chart Number       : 002 7000592
Client First Name/MI : JOHN                 /      Provider Number    : 002-683
Birthdate            : 09 12 1925           Social Security No : 497 74 2497

Sel Last Name      First Name  MI  Birthdate      SSN          State Id  CI  ##
- SMITH            TIMOTHY     S   04-21-1960   497 55 1234  121525      27
- SMITH            NELSON       D   05-18-1924   381 55 1234  150925      15
- SMITH            JAMES        02-15-1958   489 55 4321  366925      14
- SMITH            JAMES        R   02-11-1954   495 55 4321  403913      Y  14
- SMITH            JOSHUA       C   07-21-1979   491 55 1234  402542      14
- SMITH            JOHN         M   02-02-1956   404954      13
- SMITH            CARL         E   02-25-1960   297 55 1234  410089      12

- New Admission                                     Line 1 of 32

F1=HELP  F3=RETURN  F6=REFRESH  F7=BWD  F8=FWD  F15=MENU
```

CTRAC Online User's Guide – Appendix A

CTRAC ACTIVE CLIENT LIST/SELECT

(FROM Y092 – MAIN MENU -- OPTION 40 – ACTIVE CLIENTS)

Y237

DMH - CTRAC 11-13-2000
CTRAC Active Client List/Select 09:37:48

Select (/) a record & press F16 for Demographics or F18 for Provider Episode.

Provider : 001-665 FULTON STATE HS Total active clients : 000072
Enter Search Chart Number : 001 _____ or Name : _____ and press ENTER

| Sel | Chart Number | Last Name | First Name | Admission Date | State ID |
|-----|--------------|------------|------------|----------------|----------|
| _ | 001 0000017 | BUTLER | LINDSEY | 09-09-1996 | 401951 |
| _ | 001 0000033 | LEPIEU | PEPE | 09-01-1996 | 405284 |
| _ | 001 000005- | ROWLANDSKI | RALPH | 01-01-1994 | 407887 |
| _ | 001 0000068 | DUCK | DONALD | 09-01-1996 | 409728 |
| _ | 001 0000076 | BUTLER | ALFIE | 09-01-1996 | 400850 |
| _ | 001 0000084 | MCCARTNEY | JAMES | 09-02-1996 | 401961 |
| _ | 001 0000092 | BUTLER | LAWRENCE | 09-01-1996 | 403072 |
| _ | 001 0000122 | BRITT | NONI | 11-20-1997 | 408847 |
| _ | 001 0000130 | MEALY | CHAD | 11-20-1997 | 409958 |
| _ | 001 0000149 | RACKERS | LEON | 11-01-1999 | 411359 |

AA019-I: Successfully DISPLAYED MORE +

F1=HELP F3=RETURN F5=CLEAR F6=REFRESH F7=BWD F8=FWD F13=SUB-MENU
F16=DEMOGRAPHICS F18=PROV-EPISODES F21=BY-CHART F22=BY-NAME F23=COUNT

CTRAC Online User's Guide – Appendix A

CHANGES TO DEMOGRAPHICS ACTIVE CLIENTS REPORT LIST/SELECT

(FROM Y092 – MAIN MENU -- OPTION 50 – DEMOGRAPHICS CHANGE REPORT)

Y238

```
DMH - CTRAC                                11-13-2000
Changes to Demographics of Active Clients Report - List/Select  09:41:22

Enter Search Criteria and press ENTER
or Select (/) a record and press (F2) DETAIL.

Provider : 001-665  FULTON STATE HS
Enter Search Date : 11 13 2000  and/or Chart Number : ____ & press ENTER.

Sel  Process Date  Chart Number  Last Name      First Name      State ID
--  -
_    05-25-1999    001 0453763    HEIBAL         MATTHEW         59616
_    05-25-1999    001 0715016    HAWK           DIANE           4855
_    05-25-1999    001 0724740    VILLAME        MICHAEL         5323
_    05-25-1999    001 0776856    GARCIA         PAUL            415117
_    05-25-1999    001 078736-    BURTUN         HAROLD          293215
_    05-25-1999    001 0907896    WILKAY         BRYAN           436800
_    05-25-1999    001 0909589    HUDGES         JOSH            540069
_    05-25-1999    001 0910633    PHILLIP        ROGER           569662

AA019-I: Successfully DISPLAYED                                MORE
F1=HELP F2=DETAIL F3=RET F5=CLR F6=RFSH F7=BWD F8=FWD F20=LIST F21=FIND-CHART
```

DEMOGRAPHICS CHANGE REPORT DETAIL

(F2 DETAIL FROM ABOVE SCREEN)

Y239

```
DMH - CTRAC                                11-13-2000
Demographics Change Report Detail          09:44:13

Provider      : 001-665                      Chart Number   : 001 0715016
Process Date  : 05-25-1999                  Client State ID : 4855

Verify changes and press F8 for next record.

First         Middle        Last Name      Suf   DCN      SSN
Prev : DIANE   F            HAWK           00939450  494551234
Curr : DIANE   F            HAWK           00939450  494551234

Street Line 1                Street Line 2
Prev : RAYFORD JANE HOUSE    716 CLARK AVE
Curr : APT 2                  3401 SEARS CT

City          State  Zip Code  Birth Date  Race  Sex
Prev : JEFFERSON CITY    MO    65101    10-22-1961  01    F
Curr : COLUMBIA            MO    65202    10-22-1961  01    F

F1=HELP F3=RETURN F7=BWD F8=FWD F9=HOME F13=SUB-MENU F16=DEMO F18=PROV-EPIS
```

CTRAC Online User's Guide – Appendix A

CODE TABLE MENU

(FROM Y092 – MAIN MENU -- OPTION 70 – CODE TABLES)

Y152

DMH - CTRAC
Code Table Menu

11-13-2000
10:18:35

Input the number of your choice and press ENTER. ____

- | | |
|-------------------------------------|---------------------------|
| 1. Birthplace Code | 12. Referral Source Code |
| 2. Commitment Code | 13. Relationship Code |
| 3. County Code List | 14. Religion Code |
| 4. Diagnosis Code | 15. Source Payment Code |
| 5. Dietary Code | 16. Professional Code |
| 6. Discontinuation Referral Code | 17. Substance Abuse Code |
| 7. Medicaid Medicare Indicator Code | 18. Title Index Code |
| 8. Offense Code | 19. Language Group Code |
| 9. Private Insurer Code | 20. Help Pages |
| 10. Public Assistance Code | 21. Children's Initiative |
| 11. Race Code | |

F1=HELP F3=EXIT

INFORMATION SYSTEMS

EXAMPLE ACCESS REQUEST FORMS

There are two sets of access forms included. One set is for Contract Providers; the other set for State Owned Providers and Department Staff. Please go to the DMH web pages for the most recent versions.

Contact providers:

Go to: <http://www.dmh.mo.gov/>

Select Offices, then Information Systems, then Access Request Forms

Facility and Central Office users:

Go to: <http://dmhonline.dmh.state.mo.us/>

Select Offices. then Information Systems, then Resources, then Forms, then DMH Security Request Form.

CTRAC Online User's Guide – Appendix B

Contract Provider Access Request Form
(Draft 1/20/00)

☐ New ☐ Change ☐ Revoke User ID

PART 1 User Information (please print clearly)

Identification

| | | |
|-----------------|------------------|---|
| Last Name _____ | First Name _____ | Mid Initial _____ |
| SSN _____ | User ID _____ | (User ID Required for Change or Revoke) |

| |
|--|
| Provider Name _____ |
| Provider Number(s) _____ (Primary Provider) _____ |

SDC Netname _____
(Completed by Local Security Coordinator - required)

Division (check all that apply)
☐ ADA ☐ CPS ☐ MRDD

PART 2 Confidentiality Statement

I, the undersigned, a designated representative of the provider named above, understand that the approval and assignment of the requested ID or change enables me to access the Department of Mental Health Information Systems. I understand that Federal and State laws require confidentiality of the Department of Mental Health information and provide penalties for unauthorized access, use, or disclosure of this information. I agree to keep confidential all information made available to me through this access. I also agree not to divulge or share my password with anyone.

I agree to use the information obtained through these systems for purposes directly connected with the administration of a federal/state assisted program which provides assistance in cash or in kind, or services, directly to individuals on the basis of need. I further agree to comply with the policies and procedures established by the Department of Mental Health further governing the access and use of this information.

Violations or disclosures on my part may result in loss of access to the information systems, civil court action, or cancellation of the provider contract with the Missouri Department of Mental Health.

| | |
|----------------------------------|------------|
| User Signature _____ | Date _____ |
| Local Security Coordinator _____ | Date _____ |

| | |
|--------------------------------|------------|
| Central Office Use Only | |
| Request Completed by _____ | Date _____ |

Send completed form to OIS Security Coordinator, DMH Central Office.

CTRAC Online User's Guide – Appendix B

PART 3 Production Systems Information

Check all system accesses required and indicate whether access should be Added or Removed.

| Add | Remove | System Name | Purpose |
|-----|--------|--|-----------------------|
| | | CTRAC - Client Tracking, Registration, Admission, and Commitment (complete Part 4) | client registry |
| | | ISAP - Individual Standardized Assessment Protocol | assessment |
| | | MEIS - Medicaid Eligibility Information System (complete Part 4) | medicaid info |
| | | MSAS - Missouri Service Authorization System (complete Part 5) | service authorization |
| | | POS - Purchase of Service | payments |

PART 4 CTRAC/MEIS Access Information

Complete only if requesting access to CTRAC or MEIS Production Systems.

Cross Provider Inquiry Access requested? ☐ Yes ☐ No (one per provider)

Will User ID be used for batching? ☐ Yes ☐ No

| | | | | | | | | |
|--------------------------------------|--|----------|--|-----|--|--------|--|--------|
| Client Admissions | | Inquire | | Add | | Update | | Delete |
| Client Demographics | | Inquire* | | Add | | Update | | |
| Client Court Order Commitment | | Inquire | | Add | | Update | | Delete |
| Chart | | Inquire* | | Add | | Update | | Delete |
| Chart Provider Episode | | Inquire* | | Add | | Update | | Delete |
| Chart Admission/Commitment | | Inquire | | Add | | Update | | Delete |
| Diagnosis Episode | | Inquire* | | Add | | Update | | Delete |
| Program Episode | | Inquire* | | Add | | Update | | Delete |
| Staff | | Inquire | | Add | | Update | | Delete |
| Standard Means Test (Reimbursements) | | Inquire* | | Add | | Update | | Delete |
| Provider Locations | | Inquire | | | | | | |
| MEIS | | Inquire* | | | | | | |

* Minimum level required for MSAS Access

PART 5 MSAS Access Information**

Complete only if requesting access to MSAS Production System.

| | | | | | | |
|----------------------------------|--|---------|--|--------|--|--------|
| Authorization Plan | | Inquire | | Update | | Delete |
| Active Client Report (msreports) | | | | Add | | Delete |

****CTRAC/MEIS accesses also required - see Part 4**

Instructions for Completing Form

Type of Request

- New = no previous access requested
- Change = current User ID requires name, level, division, or provider change, additional system(s) access or remove system(s) access
- Revoke = current User ID no longer needs access to DMH systems

Part 1 User Information

New Request

- Complete full Name and SSN.
- Check which type of employer
- Complete Provider Name and 7-digit Primary Provider Number for access.
- If access is needed to additional Providers, indicate other Provider Numbers required.
- Check which Division is appropriate for your access.
- SDC Netname must be completed by the local Security Coordinator.

Change Request

- Complete full Name, SSN, and User ID.
- Complete Provider information to be changed, if appropriate.
- Complete Division if changed.

Revoke Request

- Complete full Name, SSN, and User ID of user accesses to be revoked.

Part 2 Confidentiality Statement

- Complete the entire form, read the confidentiality statement, sign the form, and forward it to the local provider or division Security Coordinator for approval.
- Division or Provider Security Coordinator must send the completed form to the DMH Central Office, OIS Security Coordinator.
- Upon completion of the access request, the OIS Security Coordinator will sign and date the form.

Part 3 Production Systems Information

Complete this section if access to production systems is being requested. Note that some data accesses require approval from another source prior to OIS approval. The OIS Security Coordinator will verify that proper sources have given approval prior to processing the request.

New Request

- Indicate all system accesses required by checking in the Add column.

Change Request

- Indicate system accesses to be Added or Removed by checking in the appropriate column.

Part 4 CTRAC/MEIS Access Information

Complete this section if selections in Part 3 indicated this requirement.

- Answer questions related to cross provider access and batching.
- Indicate the level of access needed for each function of CTRAC and MEIS.

Part 5 MSAS Access Information

Complete this section if selections in Part 3 indicated this requirement.

Department Central Office Security Coordinators

| | |
|-------|------------------|
| ADA | Donna Nelson |
| CPS | Tom Rehak |
| MRDD | Gary Schanzmeyer |
| ODA | Gary Lorts |
| Admin | Marsha Tremaine |
| OIS | Lovena Gibson |

CTRAC Online User's Guide – Appendix B

DMH Staff Access Request Form
(Draft 11/10/99)

☐ New ☐ Change ☐ Revoke User ID

PART 1 User Information (please print clearly)

Identification

| | | |
|-----------------|------------------|--|
| Last Name _____ | First Name _____ | Mid Initial _____ |
| SSN _____ | User ID _____ | (User ID Required for Change or Revoke) |

Employed By (check one)

☐ Central Office ☐ Regional Office ☐ State Facility

| |
|---|
| Region _____ |
| Provider Number(s) _____ (Primary Provider) |

SDC Netname _____
(Completed by Local Security Coordinator - required)

Division (check all that apply)

☐ ADA ☐ CPS ☐ MRDD

PART 2 Confidentiality Statement

I, the undersigned, a designated representative of the provider named above, understand that the approval and assignment of the requested ID or change enables me to access the Department of Mental Health Information Systems. I understand that Federal and State laws require confidentiality of the Department of Mental Health information and provide penalties for unauthorized access, use, or disclosure of this information. I agree to keep confidential all information made available to me through this access. I also agree not to divulge or share my password with anyone.

I agree to use the information obtained through these systems for purposes directly connected with the administration of a federal/state assisted program which provides assistance in cash or in kind, or services, directly to individuals on the basis of need. I further agree to comply with the policies and procedures established by the Department of Mental Health further governing the access and use of this information.

Violations or disclosures on my part may result in loss of access to the information systems, civil court action, or cancellation of the provider contract with the Missouri Department of Mental Health.

| | |
|----------------------------------|------------|
| User Signature _____ | Date _____ |
| Local Security Coordinator _____ | Date _____ |
| Central Office Use Only | |
| Request Completed by _____ | Date _____ |

Send completed form to OIS Security Coordinator, DMH Central Office.

CTRAC Online User's Guide – Appendix B

PART 3 Production Systems Information

Check all system accesses required and indicate whether access should be Added or Removed.

| Add | Remove | System Name | Purpose |
|----------------------------|--------|--|------------------------|
| | | CTRAC - Client Tracking, Registration, Admission, and Commitment (complete Part 4) | client registry |
| | | MEIS - Medicaid Eligibility Information System (complete Part 4) | Medicaid info |
| | | * iiTS - Incident & Investigation Tracking System (complete Part 5) | client incidents |
| | | ISAP - Individual Standardized Assessment Protocol | assessment |
| | | | |
| | | Community Placement | payments |
| | | Services | client services |
| | | NAFS - Non Appropriated Fund System | client banking |
| | | Vendor (and Contracts) | contracts |
| | | POS - Purchase of Service | payments |
| | | | |
| | | Personnel | HR info |
| | | Staff Development | staff training |
| | | Time and Attendance | staff time |
| | | | |
| | | Fund Encumbrance | accounting |
| | | Drug Inventory | list of drugs |
| | | Property Control | inventory |
| | | Budget Management | Budget |
| Central Office Only | | | |
| | | MSAS - Missouri Service Authorization System (complete Part 6) | service authorizations |

* Access is contingent upon final approval from Central Office

CTRAC Online User's Guide – Appendix B

PART 4 CTRAC/MEIS Access Information

Complete only if requesting access to CTRAC or MEIS Production Systems.

Cross Provider Inquiry Access requested? ____Yes ____No (one per provider)

Will User ID be used for batching? ____Yes ____No

| | | | | | | | | |
|---------------------------------|--|----------|--|-----|--|--------|--|--------|
| Client Admissions | | Inquire | | Add | | Update | | Delete |
| Client Demographics | | Inquire* | | Add | | Update | | |
| Client Court Order Commitment | | Inquire | | Add | | Update | | Delete |
| Chart | | Inquire* | | Add | | Update | | Delete |
| Chart Provider Episode | | Inquire* | | Add | | Update | | Delete |
| Chart Admission/Commitment | | Inquire | | Add | | Update | | Delete |
| Diagnosis Episode | | Inquire* | | Add | | Update | | Delete |
| Program Episode | | Inquire* | | Add | | Update | | Delete |
| Staff | | Inquire | | Add | | Update | | Delete |
| Std Means Test (Reimbursements) | | Inquire | | Add | | Update | | Delete |
| Unit/Ward & Certification | | Inquire | | Add | | Update | | Delete |
| Provider Locations | | Inquire | | | | | | |
| MEIS | | Inquire* | | | | | | |
| Central Office Only | | | | | | | | |
| Provider Demographics | | Inquire | | Add | | Update | | Delete |
| Treatment Programs | | Inquire | | Add | | Update | | Delete |
| Code Tables | | Inquire | | Add | | Update | | Delete |

*** Minimum level required for MSAS access**

PART 5 iiTS Access Information

Complete only if requesting access to iiTS Production System.

User Level (check one)

☐ State Facility ☐ Region ☐ Central Office

| | | | | | | |
|----------------------------|--|---------|--|--------|--|--------|
| Registry Inquire | | Inquire | | | | |
| Incident Report | | Inquire | | Update | | Delete |
| Incident Decision | | Inquire | | Update | | |
| Investigation | | Inquire | | Update | | Delete |
| Determination | | | | Update | | |
| Involved Summary | | Inquire | | | | |
| Plan Request | | Inquire | | Update | | Delete |
| Plan Action | | Inquire | | Update | | Delete |
| Event Log | | | | Update | | |
| Central Office Only | | | | | | |
| History | | Inquire | | Update | | Delete |
| Registry | | Inquire | | Update | | Delete |
| Codes | | | | Update | | |

PART 6 MSAS Access Information*

Complete only if requesting access to MSAS Production System.

| | | | | | | |
|----------------------------|--|---------|--|--------|--|--------|
| Authorization Plan | | Inquire | | Update | | Delete |
| Central Office Only | | | | | | |
| Program Services | | Inquire | | Update | | Delete |
| Service Catalog | | Inquire | | Update | | Delete |
| Codes | | Inquire | | Update | | Delete |
| System Message | | | | Update | | |

***CTRAC/MEIS access also required - see Part 4**

PART 7 Data Warehouse Access Information

| <u>Add</u> | <u>Remove</u> | <u>Data Requested</u> |
|-------------------|----------------------|----------------------------------|
| | | Community Placement |
| | | * CSTAR |
| | | CTRAC/MEIS |
| | | Fund Encumbrance |
| | | * iiTS |
| | | * MSAS |
| | | NAFS |
| | | POS |
| | | Remittance Advice |
| | | Services |
| | | * ISAP |
| | | Workers Comp |
| | | SAMII Financials |
| | | SAMII Document Transactions File |
| | | Vendor (and contracts) |

*Access is contingent upon final approval from Central Office.

PART 8 Decision Support Reporting (Web)

| <u>Add</u> | <u>Remove</u> | <u>Data Requested</u> |
|-------------------|----------------------|------------------------------|
| | | MSAS Reports |
| | | SAMII Reports |
| | | NAFS Reports |
| | | iiTS Registry Reports |
| | | MSAS Administrative Reports |
| | | Reimbursement Reports |

Scope of Data Available

☐ Additional Data Request Attached

Access will be granted to data belonging to your employer as indicated in Part 1. To gain access to additional information, please attach a written justification.

CTRAC Online User's Guide – Appendix B

Department Central Office Security Coordinators

| | |
|-------|------------------|
| ADA | Donna Nelson |
| CPS | Tom Rehak |
| MRDD | Gary Schanzmeyer |
| ODA | Gary Lorts |
| Admin | Marsha Tremaine |
| OIS | Lovena Gibson |

Data Warehouse Access Approvals by Requestor's Security Coordinators

| |
|---------------------|
| Community Placement |
| CTRAC |
| MEIS |
| POS |
| Provider |
| Remittance Advice |
| Services |
| Fund Encumbrance |

Data Warehouse Access Approvals by Central Office Staff

| | |
|---------------------------------|---|
| CSTAR | Donna Nelson |
| iiTS Incidents & Investigations | iiTS Coordinators (Greg Dale - CPS, Jackie Coleman - MRDD, Rosie Anderson-Harper - ADA, Jeff Grosvenor - others) |
| iiTS History | iiTS Coordinators |
| iiTS Registry | iiTS Coordinators |
| Medicaid | Bruce Vieweg |
| ISAP | Bruce Vieweg |
| MSAS | Donna Nelson |

Decision Support Reporting Access Approvals by Central Office Staff

| | |
|-----------------------|-------------------------------|
| MSAS Reports | Lois Schroeder |
| SAMII Reports | Joan Imhoff/Suzanne Knaebel |
| NAFS Reports | Facility Security Coordinator |
| iiTS Registry Reports | iiTS Coordinators |
| MSAS Administrative | Lois Schroeder |

CENTRAL OFFICE SECURITY COORDINATOR USE ONLY

Users Domain:

Instructions for Completing Form

Type of Request

- New = no previous access requested
- Change = current User ID requires name, level, division, or provider change, additional system(s) access or remove system(s) access
- Revoke = current User ID no longer needs access to DMH systems

Part 1 User Information

New Request

- Complete full Name and SSN.
- Check which type of employer
- Complete Provider Name or Region and 7-digit Primary Provider Number for access.
- If access is needed to additional Providers, indicate other Provider Numbers required.
- Check which Division is appropriate for your access.
- SDC Netname must be completed by the local Security Coordinator.

Change Request

- Complete full Name, SSN, and User ID.
- Check which type of employer, if changed.
- Complete Provider information to be changed, if appropriate.
- Complete Division if changed.

Revoke Request

- Complete full Name, SSN, and User ID of user accesses to be revoked.

Part 2 Confidentiality Statement

- Complete the entire form, read the confidentiality statement, sign the form, and forward it to the local provider or division Security Coordinator for approval.
- Division Security Coordinator must send the completed form to the DMH Central Office, OIS Security Coordinator.
- Upon completion of the access request, the OIS Security Coordinator will sign and date the form.

Part 3 Production Systems Information

Complete this section if access to production systems is being requested. Note that some data accesses require approval from another source prior to OIS approval. The OIS Security Coordinator will verify that proper sources have given approval prior to processing the request.

New Request

- Indicate all system accesses required by checking in the Add column.

Change Request

- Indicate system accesses to be Added or Removed by checking in the appropriate column.

Part 4 CTRAC/MEIS Access Information

Complete this section if selections in Part 3 indicated this requirement.

- Answer questions related to cross provider access and batching.
- Indicate the level of access needed for each function of CTRAC and MEIS.

Part 5 & 6 iiTS or MSAS Access Information

Complete this section if selections in Part 3 indicated this requirement.

- Indicate the scope of data access needed.
- Indicate the level of access needed for each function.

Part 7 Data Warehouse Access Information

Complete this section if access to Data Warehouse is being requested. Note that some data accesses require approval from another source prior to OIS approval. The OIS Security Coordinator will verify that proper sources have given approval prior to processing the request.

New Request

- Indicate all data accesses required by checking in the Add column.

Change Request

- Indicate data accesses to be added by checking in the Add column.
- Indicate data accesses to be removed by checking in the Remove column.

Part 8 Decision Support Reporting (Web)

Complete this section if access to the Decision Support Reporting web reports is being requested. Note that some type of reports require approval from another source prior to OIS approval. The OIS Security Coordinator will verify that proper sources have given approval prior to forwarding the request to OIS-Decision Support Unit to establish a UserID and Password.

New Request

- Indicate all report access required by checking in the Add column.

Change Request

- Indicate report access to be added by checking in the Add column.

Indicate report accesses to be removed by checking in the Remove column.

ABBREVIATIONS AND ACRONYMS

| | |
|--------------|--|
| AA | Authorized Absence |
| AD | Admission |
| ADA | Alcohol and Drug Abuse (DMH Division) |
| ALOS | Average Length of Stay |
| AMA | Against Medical Advice |
| ASA | Against Staff Advice |
| CBIS | Client Based Information Systems |
| CCR | Civil Conditional Release Under Mo.632 |
| CO | Central Office |
| CPR | Community Psychiatric Rehabilitation |
| CPRC | Community Psychiatric Rehabilitation Center |
| CPS | Comprehensive Psychiatric Services, (DMH Division) |
| CR | Forensic Conditional Release Under Mo. 552 |
| CS | Community Support |
| CSTAR | Comprehensive Substance Treatment and Rehabilitation |
| CTRAC | Client Tracking, Registration, Admission, Commitment |
| DCN | Department Client Number |
| DI | Discontinuation |
| Diag | Diagnosis |
| DMH | Department of Mental Health |
| DOC | Department of Corrections |
| DSM-III-R | Diagnostic and Statistical Manual of Mental Disorder (3rd Edition - Revised) |
| DSM-IV | Diagnostic and Statistical Manual of Mental Disorder (4th Edition) |
| DSS | Division of Social Service |
| DX | Diagnosis |
| FIPS | Federal Information Processing Standards |
| ICD-9-CM | International Classification of Diseases, 9th Revision Clinical Modification |
| Id | Identification |
| Ind | Indicator |
| Lgth | Length |
| LOA | Leave of Absence |
| LOS | Length of Stay |
| Lvl | Level |
| MI | Middle Initial |
| MR/DD | Mental Retardation/Developmental Disabilities |
| NHRA | Nursing Home Reform Act |
| OIS | Office of Information System |
| OP or outpat | Outpatient |
| Pos | Position |
| POS | Purchase of Services |
| REJIS | Regional Justice Information System |
| SDC | State Data Center |
| Sel | Select |
| SSN | Social Security Number |
| Suf | Suffix |
| TLOA | Therapeutic Leave of Absence |
| UA | Unauthorized Absence |

COMPONENT DEFINITIONS

| <u>Component Name</u> | <u>Explanation of the screen</u> |
|------------------------------|---|
|------------------------------|---|

ADA ADDITIONAL DEMOGRAPHIC: Additional information required for ADA Clients.

ADMISSION/COMMITMENT: Information describing the admission/commitment data for a Client.

BLANK OUT DISCONTINUATION DATE & TIME: Screen used to open Discontinued Provider Episodes which should still be current and active.

CHANGES TO DEMOGRAPHICS OF ACTIVE CLIENTS REPORTS: When change has been made to key demographic information of a Client a Provider has a Chart on, the changes are indicated on this screen.

CHART CASE MANAGER: Individual who has been assigned to provide community support services to a Client.

CHILD ASSESSMENT: Information describing a Client's abilities and disabilities to function as a member of society.

CLIENT: Basic demographic data of an individual who is receiving or has received mental health services from a Provider or Providers.

CLIENT ADDRESS: The history of the Client's residences.

CLIENT CHART: Information specific to a Client within a Provider.

CLIENT FORENSIC EXAM RESULTS: Information gathered on a court-committed Client upon examination by a forensic examiner.

CLIENT IMPAIRMENT: A description of the Client's limitations.

CLIENT PREVIOUS LIVING ARRANGEMENT: The history of the Client's prior living arrangements.

CLIENT PRIOR NAME: Names previously used by a Client.

CLIENT SSN VERIFICATION: History of social security number verification that has been noted at the time specific demographic information was changed.

CLIENT TREATMENT TEAM: A group of staff members responsible for the treatment of a Client.

CTRAC ACTIVE CLIENT: List of Clients showing as active at a Provider. To be Active the Provider Episode has no Discontinuation data.

DATA INTEGRITY PROGRAM: The Provider can check on individual Client records for major problems which may be keeping the record from going to Census.

DIAGNOSIS EPISODE: The assessment of the Client's problems at a specific point and time.

COMPONENT DEFINITIONS (cont.)

FORENSIC COMPETENCY EXAM RESULTS: The findings of a forensic examination determining the competency of a Client.

FORENSIC COURT ORDER COMMITMENT: Information describing commitment data for a forensic Client.

INTERESTED PARTY: An individual or organization associated with a Client.

PRIVATE INSURER: Information pertaining to a Client's private insurance.

PROGRAM ADA STATISTICS: Information describing a Client's social environment.

PROGRAM ADA SUBSTANCE ABUSE: Information regarding a Client's substance abuse/use.

PROGRAM EPISODE: A period of time a Client receives services while in a specific program.

PROGRAM EPISODE STATUS: A change to Client's involvement in a specific program for a period of time.

PROGRAM MEDICAID MEDICARE INDICATOR: Records the types of medicaid and/or medicare programs along with effective and ending dates of these programs.

PROGRAM WARD EPISODE: A period of time a Client is assigned to a specific location.

PROVIDER COMMENT: Free form text allowing the Provider to comment on the Client.

PROVIDER EPISODE: Admission and discontinuation information of a Client at a Provider.

STAFF MEMBER: An individual employed by, or consulting for, any organization providing services to Client.

STAFF PROVIDER EPISODE: The period of time a staff member is associated with a Provider.

STANDARD MEANS TEST: This contains the summary of the information gathered or calculated when the Standard Means Test is done on a Client to determine their ability to pay for services.

SUSPENDED BATCH: Contains identifying batch information for each Client whose batch transactions are being held for further determination by the Provider.

FIELD DEFINITIONS

ACTIVE - A Client with an open Provider Episode.

ACTIVE INDICATOR - (Staff Provider Episode) Field used to specify if the staff member is actively providing services.

ACTIVITY TYPE - (Program ADA Statistics) (Program ADA Substance Abuse) Identifies the specific intervals when this data is captured (i.e. opening and closing a program).

ADA FEDERAL IDENTIFIER - (Program Episode) Alphanumeric indicator beginning with 'MO' assigned to each substance abuse/use Provider treatment site by the Substance Abuse and Mental Health Services Administration (SAMHSA).

ADA PUBLIC ASSISTANCE CODE - (Public Assistance List/Update) Public Welfare and social insurance programs the Client is receiving at the time of Admission. A Client may be in more than one public assistance program at a time.

ADDITIONAL PSYCHIATRIC PROBLEM INDICATOR - (Program ADA Statistics) Identifies whether the Client has a psychiatric problem in addition to their alcohol or other substance abuse.

ADMITTING DIAGNOSIS - The initial diagnosis established at the time of admission.

ADDRESS PROVIDER NUMBER - (Client) The Provider number associated with the Provider updating the Client address information only.

ADDRESS USER ID - (Client) The Userid of the staff member updating the Client address information.

ADMINISTRATION ROUTE CODE - (Program ADA Substance Abuse) Identifies the Client's method of administering the substance of abuse/use.

ADMISSION DATE - (Provider Episode) Date the Client entered or reentered a Provider.

ADMISSION TIME - (Provider Episode) Time the Client entered or reentered a Provider.

ADMISSION TYPE CODE - (Provider Episode) The type of entry or reentry to a Provider.

ADMISSION/COMMITMENT TYPE CODE - (Admission/Commitment) Indicates the reason the Client or others apply for services or continues to be held.

ADOPTION INDICATOR - (Client) (Client Prior Name) Indicates if the Client has been adopted.

AGE - (DMH Client Search) Current estimated age of Client. Search is conducted on the span of 5 years younger and older than age entered. This is used to limit the scope of possible Client matches.

AGE DRUG FIRST USED - (Program ADA Substance Abuse) Indicates how old the Client was at the time the drug Other than alcohol was first used. For alcohol, it is the age of first intoxication.

ARE BENEFITS EXHAUSTED FOR - (Private Insurer) Has the Client reached the maximum spend down on their private insurance policy for the Client's services required from the Department of Mental Health.

CTRAC Online User's Guide – Appendix C

FIELD DEFINITIONS (cont.)

ARREST IN TREATMENT - (ADA Additional Demographics) The number of arrests the Client has had during the current Provider episode.

ASSESSMENT DATE - (Child Assessment) Date assessment was performed.

ASSESSMENT TIME - (Child Assessment) The time the clinical judgment assessment was performed.

ASSESSORS SOCIAL SECURITY NUMBER - (Child Assessment) Social Security Number of the person doing the Client assessment.

AUTHORIZATION BEGIN DATE - (Client Title IVA Authorization Maintenance) The date is determined when an emergency situation exists pursuant to Title IV-A State Plan.

AUTHORIZATION END DATE - (Client Title IVA Authorization Maintenance) Is automatically calculated as 365 days from Begin Date.

AUTHORIZED ABSENCE - Includes clients who have been granted permission to leave a Department of Mental Health facility from inpatient status for a relatively short period of time.

AXIS NUMBER - (Diagnosis Axis) (Diagnosis CD) The number designating one of the five classes of information describing psychiatric problem(s), mental conditions, substance of abuse addictions physical conditions, severity of associated stressors and ability to function.

BED CAPACITY - (Site Maintenance)(Program Ward Maintenance)(Unit Ward Certification Maintenance) The total number of beds assigned to a ward.

BED CAPACITY CERTIFIED - (Unit Ward Certification Maintenance) The total number of beds assigned to a ward receiving a federal funding source.

BEDS EFFECTIVE DATE - (Unit Ward Certification Maintenance) The start date a ward bed count is certified for a specific federal funding source.

BEGIN DATE - (Program Ward Episode) (Admission/ Commitment) (Chart Case Manager) (Client Treatment Team) (Standard Means Test) (Private Insurer) The initial date when an event occurs which is associated with a Client. The date will vary depending on the screen.

BEGIN TIME - (Program Ward Episode) The time a Client entered a ward location.

BIRTH DATE - (DMH Client Search) (Client SSN Verification) Date of birth of Client.

BIRTH NAME INDICATOR - (Client Prior Name) Indicates if the Client's last name is the name given at birth.

BIRTHPLACE - (World Region of Birth Code) (Client) Indicates the state or foreign country of the Client's place of birth.

CASE MONITOR SOCIAL SECURITY NUMBER - (Forensic Court Order Commitment) Social security number of the Department of Mental Health forensic case monitor who follows the progress of a 'Not Guilty by Reason of Insanity' Client who has been granted a conditional release.

CTRAC Online User's Guide – Appendix C

FIELD DEFINITIONS (cont.)

CATEGORY - (Child Assessment) Is the indicator that identifies which of the Client groups for whom services are targeted.

CATEGORY TYPE - (Program ADA Substance Abuse) Indicates substance of abuse/use as primary, secondary or tertiary.

CENSUS TRACT - (Client) (Client Address) A subdivision of densely populated counties. It is used only in Jackson County and St. Louis City and is determined by street address.

CERTIFICATION TYPE - (Unit Ward Certification Maintenance) Indicates the federal funding source assigned to specific beds.

CHART COURT STATUS - (Child Assessment) A rating which indicates the child's involvement with the court system.

CHART NUMBER (HISTORICAL: Local Case Number) - (DMH Client Search) (Client Chart) (Client Chart Maintenance) (Forensic Court Order Commitment) (Audit Trail) Unique seven digit number the Provider assigns to a Client upon first admission to a Provider.

CHILD BEHAVIOR RAW SCORE - (Child Assessment) The behavior problem score of the Achenbach Child Behavior Checklist.

CHILD LIVING STATUS - (Child Assessment) A rating which identifies the child's current residence.

CHILD SCHOOL STATUS - (Child Assessment) A rating which identifies the current placement of the child in school.

CITY - (Client) (Client Previous Address) (Interested Party) Community in which Client resides.

CLIENT SCREENING RESULT - (Client Chart) A field which indicates the results of the Nursing Home Reform Act screening results.

CLINICIAN SSN - (Diagnosis Episode List) Social Security Number of the staff member making the Client's diagnosis.

CLOSE DATE - (Program Episode) Date that a program episode was closed.

CLOSE TIME - (Program Episode) Time that a program episode was closed.

CODEPENDENT INDICATOR - (ADA Additional Demographics) Field that indicates that the Client is registering for Division of Alcohol and Drug Abuse services as a non-primary abuser/user.

CODE - (See specific Code Tables for definitions and code descriptions.) A numerical, alphabetical or logical code which identifies specific items.

CODING SYSTEM - (Diagnosis CD) A standardized system of numbering diagnoses (DSM or ICD).

COMMENT DATE - (Provider Comment) Date of the staff comments.

COMMENT LINE 1 - (Provider Comment) First line of staff comments.

COMMENT LINE 2 - (Provider Comment) Second line of staff comments.

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FIELD DEFINITIONS (cont.)

COMMENT LINE 3 - (Provider Comment) Third line of staff comments.

COMMITMENT LENGTH CODE - (Admission/Commitment) The specific length of a Client's Civil Commitment.

COMMITMENT/ADMISSION TYPE CODE - (Forensic Court Order Commitment) The reason the Client is being committed to a Provider by the Circuit Court.

COMPETENT TO BE SENTENCED - (Forensic Exam Results) Indicates if the Client is competent to be sentenced based on the results of a forensic examination.

COMPETENT TO STAND TRIAL - (Forensic Exam Results) Indicates if the Client is competent to stand trial based on the results of a forensic examination.

CONDITIONAL RELEASE CODE - (Client Chart) Code that designates a special type of release from a Provider for the Client who was involuntarily committed under Statute RSMo. 552 or 632.

CONDITIONAL RELEASE INDICATOR - (Forensic Court Order Commitment) Indicates whether an involuntarily Client has been released under special conditions.

CONDITIONAL RELEASE REVOCATION DATE - (Forensic Court Order Commitment) Date the 'Not Guilty by Reason of Insanity' Client's conditional release is canceled.

CONTRACT PROVIDER - Privately operated providers that provide services to DMH clients under a contract with Department of Mental Health.

COUNTY - (Admission/Commitment) The Missouri county where a Client has established legal domicile at the time of their admission or, if it is a commitment, the Missouri county of the court.

COUNTY OF INTEREST - (Client) Missouri county where the Client would prefer to live. This is part of MRDD's policy in the Client's choice for community integration.

COURT CASE NUMBER - (Forensic Court Order Commitment) Docket number assigned by the court.

COURT CONDITIONAL RELEASE DATE - (Forensic Court Order Commitment) The date the court issues the Client's commitment which is signed by the judge.

COURT ORDER DATE - (Forensic Court Order Commitment) The date the court issues the Client's commitment.

CPS SERVICE AREA - (Client) (Client Address) A subdivision of Comprehensive Psychiatric Services' regions as defined by the Division Director.

CREATION DATE - (Client Prior Name) (Chart Alternate LCN) (Client Competency Exam Results) (Forensic Court Order Commitment) (Client Impairment) Generated date the computer record was begun.

CREATION PROVIDER NUMBER - (Client Competency Exam Results) (Forensic Court Order Commitment) Identifies the Provider who initially entered the information.

CREATION TIME - (Client Prior Name) (Chart Alternate LCN) (Client Competency Exam Results) (Forensic Court Order Commitment) (Client Impairment) Generated time the computer record was begun.

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FIELD DEFINITIONS (cont.)

CREATION USER - (Client Prior Name) (Chart Alternate LCN) (Client Competency Exam Results) (Forensic Court Order Commitment) (Client Impairment) (Client Prior Name) Userid of the staff member who began the computer record.

DCN - (Medicaid Number) (DMH Client Search) (Client) Case number assigned by the Department of Social Services.

DECEASED DATE - (Client) Date of Client's death.

DECEASED INDICATOR - (Client) Signifies the Department of Mental Health Client is deceased when date of death is unknown.

DIAGNOSIS CODE - (Diagnosis Episode List) A diagnosis code given the Client based upon DSM or ICD criteria.

DIAGNOSIS DATE - (Diagnosis Episode List) Date the diagnosis was given for a Client within a Provider.

DIAGNOSIS LEVEL - (Diagnosis Episode List) Indicates primary or secondary diagnosis.

DIAGNOSIS TIME - (Diagnosis Episode List) Time the diagnosis was given for a Client within a Provider.

DIAGNOSIS TYPE - (Diagnosis Episode List) Code which is used for type of diagnosis given for a Client within a Provider.

DIETARY CODE - (Client) Code indicating the type, texture of food, and mode of ingestion required for a Client.

DIMINISH CAPACITY - (Client Forensic Exam Results) A code indicating whether the individual receiving the forensic exam was in a state that lessened his/her abilities (diminished his/her capacities), based on what is considered "normal" capacities.

DISCHARGE DIAGNOSIS - The diagnosis established at the time of discharge/discontinuation. This may differ from the admitting or working diagnosis.

DISCONTINUATION - Clients whose Provider Episode has been ended.

DISCONTINUATION DATE - (Provider Episode) Date of discharge from a Provider.

DISCONTINUATION REFERRAL - (Provider Episode) Indicates an individual or organization that a Client is referred to upon discontinuation.

DISCONTINUATION STATUS CODE - (Provider Episode) Indicates the reason for discharge from a Provider.

DISCONTINUATION TIME - (Provider Episode) Time of discharge from a Provider.

DIVISION - (Client Chart) (Program Episode) (Diagnosis Episode List) (Admission/Commitment) (Client Chart) Six components reporting on the Department of Mental Health computer system.

DMH PROVIDER - State operated facilities, Administrative Agents, and Providers that are funded by Department of Mental Health.

DRUG USED CODE - (Program ADA Substance Abuse) Identifies the substance abused/used by the Client.

CTRAC Online User's Guide – Appendix C

FIELD DEFINITIONS (cont.)

EDUCATION LEVEL - (Client) (Program ADA Statistics) Code describing last grade completed or highest level of education completed.

EDUCATION PROGRAM INDICATOR - (Program ADA Statistics) Identifies whether the Client has completed an educational or skilled development program while in treatment.

EFFECTIVE CREATION DATE - (Client Address) The date when the current record was created.

EFFECTIVE CREATION TIME - (Client Address) The time the current record was created.

EFFECTIVE DATE - (Program Episode Status) (Program Medicaid Medicare Indicator) The earliest a specific activity occurred.

EFFECTIVE TIME - (Program Episode Status) Time the Client was placed in this status.

EMPLOYMENT STATUS - (Program ADA Statistics) Indicates the Client's current working status.

END DATE - (Staff Provider Episode) (Admission/Commitment) (Chart Case Manager) (Client Treatment Team) (Program Episode Status) (Program Ward Episode) (Forensic Court Order Commitment) (Program Medicaid Medicare Indicator) (Standard Means Test) (Private Insurer) The date anything has ended.

END TIME - (Program Episode Status) (Program Ward Episode) The time anything has ended.

EVALUATION SITE - (Forensic Court Order Commitment) Indicates the location where forensic examination evaluation was conducted.

EXAMINATION DATE - (Client Forensic Examination Results) (Forensic Exam Results) Date Client's competency/forensic examination was performed.

EXAMINATION RESULTS - (Forensic Competency Exam Results) Results derived from the Client's competency examination.

EXAMINER SSN - (Forensic Competency Exam Results) Social Security Number of person giving the competency examination.

EXAMINER SSN 1 - (Forensic Examination Results) First forensic examiner's social security number. The examiner may or may not be a Department of Mental Health employee.

EXAMINER SSN 2 - (Forensic Examination Results) Second forensic examiner's social security number.

EXPIRATION DATE - (Unit Ward Certification Maintenance) The ending date of the CERTIFICATION type.

FACILITY CODE - (DMH Main Menu) (Chart Alternate LCN) (DMH Provider Number CD) (Forensic Court Order Commitment) (Unit Program Maintenance) Three digit Id number assigned by the Department of Mental Health.

FAMILY SIZE (POVERTY LEVEL) - (ADA Additional Demographics) The number of immediate members in a family living together includes: the Client, as well as by marriage or birth, parents, children, step-children, siblings, half-brothers, half-sisters, in-laws, nieces, nephews, uncles, aunts, cousins, grandchildren, and grandparents. It also includes domestic partners and foster children.

NOTE: The following individuals are NOT to be included in this number: roomers, boarders, lodgers, roommates, and housemates and all others who share living costs as well as living quarters primarily to share expenses.

FIELD DEFINITIONS (cont.)

FAMILY SIZE - (Program Medicaid Medicare Indicator) The total number of family members, including significant others, receiving CSTAR services.

FINANCIAL FUNCTION - (Program Cost Center Maintenance) A code which defines a unique financial function and cost collection area for DMH facilities.

FIPS CODE - (County Code Table) (Federal Information Processing Standards) The Federal System used to assign codes to counties in the state of Missouri.

FIRST ADMISSION - A client who is receiving DMH services from a Provider for the first time. This is applicable for inpatient or outpatient services. Synonym: New admission.

FIRST CONTACT DATE - (Forensic Court Order Commitment) Date of Department of Mental Health's forensic examiners first encounter with Client as a result of this current court order.

FIRST NAME - (DMH Client Search) (Client) (Client Prior Name) (Interested Party) (Client SSN Verification) (Staff Provider Episode) First name of a Client, Staff Member, or other individual.

FREQUENCY OF USE CODE - (Program ADA Substance Abuse) Specifies how often the Client abuses/uses a substance.

GUARDIANSHIP COUNTY CODE - (Interested Party) Missouri county where the guardianship has been established.

HISPANIC - (Client) (ADA Additional Demographics) Indicates Hispanic origin.

HIV TEST CODE - (ADA Additional Demographics) Indicates the results of Client's last HIV Test.

HOME PHONE NUMBER - (Client) (Interested Party) Telephone number of current residence.

HOME WARD INDICATOR - (Program Ward Episode) Indicates the inpatient location where the Client sleeps at a state Provider.

HOUSEHOLD INCOME - (Standard Means Test) Total household income as reported on the Standard Means Test.

IMPAIRMENT CODES - (Client Impairment) A description of the Department of Mental Health Client's limitations.

INACTIVE - Includes clients who are not in an active treatment program or scheduled for further DMH services, but are not discharged/discontinued for some reason. Clients may be placed on inactive status when they are released from inpatient, unauthorized absence, outpatient, day program, placement, or POS only and are not scheduled to receive further DMH services within six months.

INCOME SOURCE - (Program ADA Statistics) Indicate the Client's primary means of support.

INPATIENT - Includes clients who are assigned beds and are physically present within the facility. This category excludes those on Authorized or Unauthorized Absence (Program Episode Status codes 3 through 13 inclusive). However, for statistical purposes, beds are held for these absences and they are generally included in inpatient counts.

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FIELD DEFINITIONS (cont.)

INSTITUTIONALIZED PENDING TRIAL - (Forensic Examination Results) Indicates whether the individual having received the forensic examination should be institutionalized while awaiting trial.

INTERESTED PARTY TYPE - (Interested Party) Indicates a broader classification of the Relationship code.

LAST NAME - (DMH Client Search) (Client) (Client Prior Name) (Interested Party) (Client SSN Verification) (Staff Provider Episode)
Last name of a Client, Staff Member, or other individuals.

LEGAL STATUS - (Program ADA Statistics) Indicates the Client's current criminal judicial status.

LENGTH CODE - (Admission/Commitment) The specific length of a Client's Civil Commitment.

LIVING ARRANGEMENT - (Client) (Client Previous Living Arrangement) (Program ADA Statistics) Specifies Client's usual living environment.

LOCATION - (Program Episode) Area(s) within a Provider where services are provided.

MARITAL STATUS - (Client) (Program ADA Statistics) Indicates Client's marital status.

MEDICARE NUMBER - (Client) Case Number assigned by the Social Security Administration.

MEDICATION PRESCRIBED CODE - (Program ADA Substance Abuse) Identifies the medication prescribed for treatment of substance abuse/use.

MEDICATION RELEASE INDICATOR - (Forensic Court Order Commitment) Indicates whether or not a Client was receiving prescribed psychotropic medications at the time of conditional or unconditional release.

MENTAL DEFECT - (Client Forensic Examination Result) A code indicating whether the individual receiving the forensic exam has a mental defect.

MENTAL DISEASE - (Client Forensic Examination Results) A code indicating whether the individual receiving the forensic exam has a mental illness.

METHADONE USE PLAN INDICATOR - (Program ADA Substance Abuse) Identifies whether methadone will be used as part of the Client's treatment.

MIDDLE INITIAL - (DMH Client Search) (Client) (Client Prior Name) The first letter of the person's middle name.

MIDDLE NAME - (DMH Client Search) (Client) (Client Prior Name) (Interested Party) (Client SSN Verification) Middle name of a Client, Staff Member, or other individuals.

MISSOURI COUNTY BIRTH CODE - (Client) The Missouri county in which the Client was born.

MONTHLY INCOME (\$) - (ADA Additional Demographics) (Standard Means Test Maintenance) Gross monthly income from all sources as shown on the most current Standard Means Test.

MRDD MEDICAID WAIVER INDICATOR - (Client Chart) Indicates a Medicaid Waiver Client.

NON-DMH CARE LEVEL - (Provider Episode) Indicates highest level of non-Department of Mental Health care prior to this Provider episode.

CTRAC Online User's Guide – Appendix C

FIELD DEFINITIONS (cont.)

NON-DMH CLIENT INDICATOR - (Provider Episode) Identifies whether the Client is receiving Department of Mental Health funded services.

NUMBER OF ARRESTS - (ADA Additional Demographics) The number of times the Client has been arrested within the last 24 months prior to the current episode.

NUMBER OF CHILDREN - (Client) (ADA Additional Demographics) Number of non-emancipated children, either by birth or adoption, in the Client's care.

NUMBER OF DWI ARRESTS - (ADA Additional Demographics) Indicates the number of times the Client has been arrested for driving under the influence during the Client's life time.

OCCUPATION - (Client) (Program ADA Statistics) Indicates the current occupation of the Client.

OFFENSE CHARGE 1 CODE - (Forensic Court Order Commitment) An offense with which the Client is charged and is related to the current court order.

OFFENSE CHARGE 2 thru 5 CODE - (Forensic Court Order Commitment) Additional offense(s) with which the Client is charged and is related to the current court order.

OPEN DATE - (Program Episode) Date that the Client was associated with a Treatment Program.

OPEN TIME - (Program Episode) Time the Client was associated with a Treatment Program.

ORIGINAL ADMISSION DMH DATE - (Client) Client's first admission date into Department of Mental Health.

OTHER INCOMPETENCIES - (Client Forensic Examination Result) A code indicating whether the individual receiving the forensic exam has other incompetencies.

OTHER PHONE NUMBER - (Client)(Client Interested Party) An alternate phone number.

OUTPATIENT - Includes clients who are not assigned a facility bed and are not in a current day program, or community placement. Outpatient services are usually received on a scheduled basis for periods of less than two hours duration, but also may be unscheduled.

PHONE NUMBER - (Staff Provider Episode) Department of Mental Health staff telephone number

PLACEMENT - Includes clients placed in an appropriately licensed and contracted Residential Facility.

PLACEMENT PROVIDER - (Program Episode) Supportive Community Living Provider Number.

POS CONTRACT INDICATOR - (Client Chart) Indicates if the Provider has a Purchase of Service Contract.

POS SERVICE INDICATOR - (Client Chart) Indicates if services for the Client are being provided under a Purchase of Service Contract.

PREGNANT AT ADMISSION CODE - (ADA Additional Demographics) Indicates if Client is pregnant at time of admission.

FIELD DEFINITIONS (cont.)

PRIMARY ABUSER STATE ID - (ADA Additional Demographics) (Program Medicare Medicaid Indicator) The CTRAC generated identification number of the Client who is or has been in treatment for a substance abuse problem which initiated this codependent's admission.

PRIMARY COMMITMENT INDICATOR - (Admission/Commitment) When two or more open commitments, this indicates which one is the principal reason for this admission episode.

PRIMARY DIAGNOSIS/SECONDARY DIAGNOSIS - Clients may have multiple diagnosis, primary, and one or more secondary diagnosis. These are basically sub categories of admitting, working, and discharge diagnosis which indicates the main focus of treatment or attention.

PRIMARY SOURCE OF PAYMENT, expected - (ADA Additional Demographics) The Client's primary source of payment for this treatment episode.

PRINCIPAL DIAGNOSIS CODE 1ST DIVISION - (Client Chart) DSM code which represents the Client's focus of attention or treatment.

PRINCIPAL DIAGNOSIS CODE 2ND DIVISION - (Client Chart) DSM code which represents the Client's focus of attention or treatment.

PRINCIPAL DIAGNOSIS CODE 3RD DIVISION - (Client Chart) DSM code which represents the Client's focus of attention or treatment.

PRINCIPAL PROGRAM CLASS 1ST DIVISION - (Client Chart) Identifies of the two or more open programs which one is the principle program.

PRINCIPAL PROGRAM CLASS 2ND DIVISION - (Client Chart) Identifies of the two or more open programs which one is the principle program.

PRINCIPAL PROGRAM CLASS 3RD DIVISION - (Client Chart) Identifies of the two or more open programs which one is the principle program.

PRIOR DETOX CODE - (ADA Additional Demographics) Total number of prior detoxification treatment episodes.

PRIOR OUTPATIENT CODE - (ADA Additional Demographics) Total number of prior outpatient treatment episodes.

PRIOR RESIDENTIAL CODE - (ADA Additional Demographics) Total number of prior residential treatment episodes.

PRIVATE INSURANCE GROUP NUMBER - (Private Insurer) Client's private insurance group policy number.

PRIVATE INSURANCE NUMBER - (Private Insurer) Client's private individual insurance policy number.

PRIVATE INSURER CODE - (Private Insurer) Indicates the Client's private insurance company.

PROFESSIONAL CATEGORY - (Staff Provider Episode) Indicates staff member's level of qualifications to provide service.

CTRAC Online User's Guide – Appendix C

FIELD DEFINITIONS (cont.)

PROGRAM CATEGORY - (Diagnosis Episode List) Indicates the Client's setting at the time of diagnosis.

PROGRAM CLASS - (Program Episode) A code to identify the type of treatment program.

PROGRAM SUCCESS INDICATOR - (Program ADA Statistics Maintenance) Client has completed the Program Episode and has completely abstained from substance abuse or use during the Program Episode.

PROGRAM TYPE - (Program Medicaid Medicare Indicator) Specifies treatment/intervention the Client is receiving.

PROPOSED AUTHORIZED ABSENCE RETURN DATE - (Program Episode Status) Date the Client is scheduled to return from Authorized Absence.

PROVIDER NAME - (MEIS Code Tables/DMH Provider Number CD) (Program Episode List/Select) (Unit Program Maintenance)
Legal name of an organization. (Non keyable field)

PROVIDER NUMBER - (DMH Main Menu) (Client Address) (Audit Trail) (DMH Provider Number CD) (Interested Party) (Unit Program Maintenance) (Standard Means Test) (Private Insurer) Id number assigned by the Office of Administration to all Providers. (Previously known as vendor number). (Non keyable field)

RACE CODE - (DMH Client Search) (Client) (ADA Additional Demographics) A classification that represents the Client's race.

RE-ADMISSIONS - A client who has previously received inpatient, outpatient or residential services from a DMH provider, (at any time), and is readmitted for additional services.

REFERRAL SOURCE CODE - (Provider Episode Admission) (ADA Additional Demographics) Indicates an individual or organization that referred the Client for services.

REFERRING COURT COUNTY CODE - (Forensic Court Order Commitment) County in which the court is located.

REJIS IDENTIFICATION - (Client Forensic Examination Results) (Regional Justice Information System) A number used to cross reference with county, state and federal systems.

RELATIONSHIP CODE - (Interested Party) Indicates relationship of Interested Party to the Client.

RELIGION CODE - (Client) Indicates the religion of the Client.

REPORT COURT DATE - (Forensic Court Order Commitment) Date report is sent to the court.

RESIDENTIAL COUNTY - (Client) (Client Address) (Interested Party) The Missouri county where the Client currently resides including residential Providers. This county is associated with the current address of the Client. On the Interested Party Maintenance, it is the county in which the Interested Party resides and goes with the address shown for the Interested Party.

RESIDENCE RELEASED TYPE CODE - (Forensic Court Order Commitment) Type of residence the 'Not Guilty by Reason of Insanity' Client will reside in after being granted a conditional or unconditional release.

RESPONSIBLE TIME OF OFFENSE - (Client Forensic Examination Results) Identifies whether the individual receiving the forensic exam was able to assume responsibility for himself/herself at the time an offense was committed.

CTRAC Online User's Guide – Appendix C

FIELD DEFINITIONS (cont.)

SELF HELP PROGRAM CODE - (ADA Additional Demographics) Indicates the Client's level of participation in an independent support or fellowship organized by or for substance abusers/users.

SERVICE PROVIDER TYPE CODE - (Forensic Court Order Commitment) Category of caregiver providing treatment upon conditional or unconditional release.

SERVICE AREA CODE - (Program Ward Maintenance) This specifies how the ward can be used. Note that this code must be consistent with the corresponding code on each of the locations that make up the program ward.

SEX - (DMH Client Search) (Client) Gender of the Client.

SMT DEPENDENTS - (Standard Means Test) The number of qualified dependents reported on the Standard Means Test.

SMT MONTHLY INCOME - (Standard Means Test) Gross monthly income from all sources as shown on the most current Standard Means Test.

SOCIAL SECURITY NUMBER - (DMH Client Search) (Client) (Interested Party) (Staff Provider Episode) A number assigned to the staff/Client by the Social Security Administration.

SPECIAL EDUCATION CODE - (Client) (Program ADA Statistics) Indicates the level of the Client's special education requirements.

SSN SENT FOR VERIFICATION INDICATOR - (Client) Indicates whether the Client's social security number, if present, has been sent to the Social Security Administration for verification.

SSN VERIFICATION CODE - (Client) Indicates whether the Social Security Number is correct according to the Social Security Administration.

STATE - (Client) (Interested Party) (Client Address) A standard two-character, alphabetic abbreviation for the State name.

STATE ID - (DMH Client Search) (Client) Computer generated sequentially unique number that identifies a Client.

STREET 1 - (Client) (Client Address) (Interested Party) First line of the street address.

STREET 2 - (Client) (Client Address) (Interested Party) Second line of the street address.

SUFFIX - (Client) (Client Address) (Interested Party) Suffix of last name. (i.e. SR, JR, III, etc.)

TB INDICATOR - (ADA Additional Demographics) ~~Indicates whether a client has Tuberculosis. A “Y” indicates the client has Tuberculosis and a “N” means client does not have TB.~~ Indicates if a client has TB.

TEAM NAME - (Client Treatment Team) Free form name given to a Treatment Team by the Provider.

TERMINATION DATE - (Site Maintenance)(Unit Program Maintenance)(Program Cost Center Maintenance)(Program Ward Maintenance)(Unit Ward Certification maintenance) The last date a specific activity is accepted or valid.

TITLE INDEX - (Staff Provider Episode) State of Missouri merit system job classification.

CTRAC Online User's Guide – Appendix C

FIELD DEFINITIONS (cont.)

TITLE XIX FOOD INDICATOR - (Client Chart) Indicates if the Client is eligible for, but not necessarily receiving, the Title XIX food program.

TRANSFER REASON - (Provider Episode) Free form text allowing the user to expand upon the reason why the Client is transferring to another Provider.

TREATMENT PROGRAM CODE - (Program Episode) Identifies treatment Client is receiving.

TRIAL RELEASE INDICATOR - (Forensic Court Order Commitment) Indicates whether the 'Not Guilty by Reason of Insanity' Client has ever had a trial release prior to the conditional/unconditional release.

RELATIONSHIP TYPE - (Interested Party) Indicates a broader classification of the relationship code.

TYPE CODE - (Admission/Commitment) Indicates the reason the Client or others applies for services or continues to be held.

UNAUTHORIZED ABSENCE - Includes clients who leave a DMH facility without permission while on inpatient status or who did not return from an authorized absence.

UNCONDITIONAL RELEASE DATE - (Forensic Court Order Commitment) Date the court ordered the release of the 'Not Guilty by Reason of Insanity' Client from Department of Mental Health Services with no conditions.

USER IDENTIFICATION - (Entry Validation) A unique identifier assigned to staff members by Department of Mental Health allowing access to the department's automated system.

VERIFICATION CODE - (Client) Indicates whether the Social Security Number is correct according to the Social Security Administration.

VETERAN STATUS - (Client) (ADA Additional Demographics) Indicates whether the Client has served in the Armed Forces.

WARD CODE - (Program Ward Episode) Indicates the ward where the Client is receiving care.

WEEKLY INCOME - (Client) (Program ADA Statistics) Indicates weekly income of the Client.

WORK PHONE NUMBER - (Client) (Interested Party) Phone number at person's place of employment.

WORKING DIAGNOSIS - The diagnosis established after further evaluation of the client during treatment.

WORLD REGION OF BIRTH CODE - (Client) Indicates the state or foreign country of the Client's place of birth.

ZIP CODE - (Client) (Client Address) (Interested Party) Five or nine digit number established by the postal service.

FIELD REQUIREMENT DEFINITIONS

Required and Mandatory are generally considered to be synonymous, but for the purposes of the DMH information systems they have separate and distinct meanings:

REQUIRED FIELDS - Required means that data for this field must be keyed or it will reject. When possible, additional edits are performed on these required fields to verify that the data is not only keyed, but that it is also valid. E.g., Sex is a required field and an edit is performed to ensure the keyed data is either M or F. If this field is left blank or contains any characters other than M or F it will reject.

MANDATORY FIELDS - Mandatory means the field is required by policy but no edit is performed to ensure its availability. E.g., SSN. The Social Security Number is an extremely important element for CTRAC but all Clients do not have a SSN, or the number is not known at admission. Therefore, blanks must be accepted. And, even if numbers are keyed the computer cannot tell if it is an accurate number. The computer edit can check to see if the field is either blank or contains all numeric data, but that's about all that can be checked on SSN. If the field is not blank or an alphabetic character is detected it will reject.

OPTIONAL FIELDS - All other fields are considered optional and will not cause a rejection if missing. However, edits may be performed to reject the field when data is keyed and it is incorrect. E.g., Religion Code is optional but there is a list of acceptable codes that can be validated. If any other than valid codes are keyed the field will reject.

SOUNDEX CLIENT SEARCH

The following comparisons are used in determining the search match score:

Chart Number
State Id
Social Security Number
DCN (Medicaid number)
Last name, first character
Last name, exact
First name, first character
First name, exact
Middle name, first character
Middle name, exact
Sex
Race
Birth Date
Age, exact
Age, within 5 years
Age, within 10 years

When searching for Clients, CTRAC attempts to provide a list of the best potential matches to the search criteria keyed by the User. The User may then examine the list and select the nearest match. Understanding how the search procedure operates may help the User maximize the benefits.

There are five primary search identifiers, four are unique. The unique identifiers are Chart Number, State Id, Social Security Number (SSN), and DCN (Medicaid number). When entered, these fields provide the best potential matches. The non-unique identifier is the Client name. More than one Client may have the same last name. Misspelled names also make searching difficult. Because of this, last names are passed through a Soundex routine. This routine attempts to eliminate differences in spelling so that all potential matching names may be found, even when spelled differently, i.e., "MacDonald" and "McDonald".

Since the idea of Soundex is to identify all potential name matches, some names on the list of potential matches may bear little resemblance to the entered name. This is especially true when the match is made against a prior last name and not the current name entered.

The entered criteria are compared to the potential matches and these matches are given a numerical score. A better match is assumed in the higher score(s). Some potential matches with a low score will not be displayed.

Soundex may appear to be complex and unpredictable. Some of the Soundex rules are: ignore all spaces and hyphens, all vowels are treated the same, and double letters are treated as a single occurrence of the letter. At the beginning of a name, MAC = MC, KN=N, PF = F, WR = R, and SCH = S. In the middle of a name, 'K = C', 'KN = N', 'PF = F', 'Q = G', and 'SION = CION'. At the end of a name, 'EE = IE = Y', 'TZ = Z', 'ND = RT = D', 'AY = Y', and 'S' or 'A' is ignored.

CTRAC Online User's Guide – Advanced Notes

How to Change a client's Chart Number.

| | |
|---|---|
| 1 | Logon to CTRAC Begin at CTRAC Main Menu. |
| 2 | Select SubMenu From the DMH – CTRAC Main Menu Select option 20 for Sub Menu and press Enter. |
| 3 | Enter Client ID and select Maintenance Menu On the Sub Menu enter the client State ID or current Chart number. Press the Enter key and verify the client's name. Enter option 98 and press Enter. |
| 4 | Select Change Chart Number From the Maintenance & Programming Sub-Menu enter option 20 and press Enter. |
| 5 | Enter New Chart Number On the Change Chart Number screen: key a 'U' on the command line, enter the New Chart Number and verify the Original Chart Number. Press Enter to update. |
| 6 | Confirm update Before updating, you have one chance to change your mind. Key 'Y' and press Enter to confirm the update. Look for message " AA022-I: Successfully UPDATED". |
| 7 | Done Press F9 to return to SubMenu. |

The original chart number can never be reused. CTRAC will remember the original as an alias chart number for the client.

CTRAC Online User's Guide – Advanced Notes

How to Delete a CTRAC client's Provider Episode.

| | |
|----|---|
| 1 | Logon to CTRAC Begin at CTRAC Main Menu. |
| 2 | Select SubMenu From the CTRAC Main Menu Select option 20 for Sub Menu and press Enter. |
| 3 | Enter Client ID and select Provider Episodes On the Sub Menu enter the client State ID or Chart number. Press the Enter key and verify the client's name. (If you don't know the client ID, search for it using option 10 from the CTRAC Main menu) Enter option 30 and press Enter. |
| 4 | Select desired Episode From the Provider Episode List screen, Select the desired Provider Episode and press F2. |
| 5 | Open Program Episode List From the Provider Episode Maintenance screen press F19 (shift/F7) for Program Episodes List. |
| 6 | Select an Episode From the Program Episode list/select screen, select the desired Program Episode and press F2. |
| 7 | Delete Program Episode. On the Program Episode Maintenance screen, key a "D" for Delete and press Enter. You will be asked to confirm your desire to delete by keying a "Y" and pressing Enter. Look for the deletion has successfully completed message. |
| 8 | Return to Provider Episode Maintenance Press F3 to return to Program Episode list, if there is a second Program Episode to be deleted, select it and repeat above steps. Press F3 a second time to return to Provider Episode Maintenance. |
| 9 | Delete any Diagnosis Episodes Press F17 (shift/F5) for a list of Diagnosis Episodes. If there are any they will have to be selected and deleted before you can delete the Provided Episode. F3 to return to the Provider Episode Maintenance screen |
| 10 | Delete Provider Episode On the Provider Episode Maintenance screen, key a "D" for Delete and press enter. You will be asked to confirm your desire to delete by keying a "Y" and pressing Enter. Look for the deletion has successfully completed message. If you did not delete all the Program Episodes or the Diagnosis Episodes you will get an error message telling you to do so. |
| 11 | Done Press F9 to return to Submenu. |

CTRAC Online User's Guide – Advanced Notes

How to change a Provider Episode to an EARLIER starting date.

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| 1 | Logon to CTRAC. Begin at CTRAC Main Menu. Verify correct Facility and Provider number. Select option 20 for Sub Menu. |
| 2 | Enter Client State ID. Enter client State ID or Chart Number. Press the Enter key to verify the right name. |
| 3 | Update Provider Episode Admission date. Select option 30 and select correct Provider Episode. Enter correct date and Update. |
| 4 | Add new Admission/Commitment. F20 (shift/F8) for Admission/Commitment list. Select the desired Admission/Commitment, change the Date and change Commitment Indicator to "N", and Add. F3 back to the list. F6 to Refresh the list. |
| 5 | Delete old Admission/Commitment. Select old Admission/Commitment, delete it. F3 back to the list. |
| 6 | Change Primary Commitment Indicator to "Y". Select the <i>new</i> Admission/Commitment, change Commitment Indicator to "Y" and Update. F3 twice back to Provider Episode. |
| 7 | Update Program Episode Start Date. F19 (shift/F7) for Program Episode List, select correct Program Episode. Change the Open Date and Update. F9 twice back to Submenu. |
| 8 | Optional: Check with Data integrity. Submenu option 98, then option 10. |

How to Change a Provider Episode to an LATER starting date.

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| 1 | Logon to CTRAC. Begin at CTRAC Main Menu. Verify correct Facility and Provider number. Select option 20 for Sub Menu. |
| 2 | Enter Client State ID. Enter client State ID or Chart number. Press the Enter key to verify the right name. |
| 3 | Update Provider Episode Admission date to an Earlier date. Select option 30 and select correct Provider Episode. Enter a date <u>one day before</u> the original date and Update. |
| 4 | Add new Admission/Commitment. F20 (shift/F8) for Admission/Commitment list. Select the desired Admission/Commitment, change the Date and change Commitment Indicator to "N", and Add. F3 back to the list. F6 to Refresh the list. |
| 5 | Delete old Admission/Commitment. Select old Admission/Commitment, delete it. F3 back to the list. |
| 6 | Change Primary Commitment Indicator to "Y". Select the <i>new</i> Admission/Commitment, change Commitment Indicator to "Y" and Update. F3 twice back to Provider Episode. |
| 7 | Update Program Episode Start Date. F19 (shift/F7) for Program Episode List, select correct Program Episode. Change the Open Date and Update. F3 twice back to Provider Episode. |
| 8 | Update Provider Episode Admission date. Enter correct date and Update. |
| 9 | Optional: Check with Data integrity. Submenu option 98, then option 10. |

How to change a Provider Episode to an EARLIER ending date.

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|---|---|
| 1 | Logon to CTRAC. Begin at CTRAC Main Menu. Verify correct Facility and Provider number. Select option 20 for Sub Menu. |
| 2 | Enter Client State ID. Enter client State ID or Chart number. Press the Enter key to verify the right name. |
| 3 | Update Admission/Commitment. Select option 30 and select correct Provider Episode, then F20 (shift/F8) for Admission/Commitment list. Select the desired Admission/Commitment, change the End Date and Update. F3 twice back to the Provider Episode. |
| 4 | Update Program Episode End Date. F19 (shift/F7) for Program Episode List, select correct Program Episode. Change the Close Date and Update. F3 twice back to Provider Episode. |
| 5 | Update Provider Episode Discontinuation date. Enter correct Discontinuation date and Update. |
| 6 | Optional: Check with Data integrity. Submenu option 98, then option 10. |

CTRAC Online User's Guide – Advanced Notes

How to change a Provider Episode to an LATER ending date.

| | |
|---|--|
| 1 | Logon to CTRAC. Begin at CTRAC Main Menu. Verify correct Facility and Provider number. Select option 20 for Sub Menu. |
| 2 | Enter Client State ID. Enter client State ID or Chart number. Press the Enter key to verify the right name. |
| 3 | Update Provider Episode Discontinuation date. Select option 30 and select correct Provider Episode. Enter correct Discontinuation date and Update. |
| 4 | Update Admission/Commitment. F20 (shift/F8) for Admission/Commitment list. Select the desired Admission/Commitment, change the End Date and Update. F3 twice back to the Provider Episode. |
| 5 | Update Program Episode Close Date. F19 (shift/F7) for Program Episode List, select correct Program Episode. Change the Close Date and Update. F9 twice back to Sub Menu. |
| 6 | Optional: Check with Data integrity. Submenu option 98, then option 10. |

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